

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000006675

**FILED**  
**Mar 07, 2016**  
**Secretary of State**  
**CC3087564114**

**Entity Name:** SUPERLITE ALUMINUM PRODUCTS, INC.

**Current Principal Place of Business:**

1090 RAINER DRIVE  
ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:**

1090 RAINER DRIVE  
ALTAMONTE SPRINGS, FL 32714

**FEI Number: 59-3622452**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

VALLANCOURT, TODD  
99 HORSE LOVERS LANE  
ALTAMONTE SPRINGS, FL 32714 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRES  
Name            VALLANCOURT, TODD  
Address        99 HORSE LOVERS LANE  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title            SEC  
Name            VALLANCOURT, TODD  
Address        99 HORSE LOVERS LANE  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title            V P  
Name            VALLANCOURT, ELLEN  
Address        99 HORSE LOVERS LANE  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: TODD VALLANCOURT**

**PRESIDENT**

**03/07/2016**

Electronic Signature of Signing Officer/Director Detail

Date