

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004594

FILED  
Apr 10, 2009  
Secretary of State

Entity Name: AMERICAN GLASS ASSOCIATES OF TALLAHASSEE, INC.

**Current Principal Place of Business:**

215 WEST SAVANNAH AVENUE  
VALDOSTA, GA 31601

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1144  
VALDOSTA, GA 31603

**New Mailing Address:**

FEI Number: 90-0224938      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

COPELAND, SCOT B ESQ.  
174 EAST BASE STREET  
MADISON, FL 32340 US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CP ( ) Delete  
Name: DAWKINS, SPENCER  
Address: P.O. BOX 1144  
City-St-Zip: VALDOSTA, GA 31603

Title: VCVP ( ) Delete  
Name: BARRY, DAVID W  
Address: P.O. BOX 1144  
City-St-Zip: VALDOSTA, GA 31603

Title: DT ( ) Delete  
Name: DAWKINS, LONNIE W  
Address: P.O. BOX 1144  
City-St-Zip: VALDOSTA, GA 31603

Title: DS ( ) Delete  
Name: CLANTON, WILLIAM L  
Address: P.O. BOX 1144  
City-St-Zip: VALDOSTA, GA 31603

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SPENCER DAWKINS

PRES

04/10/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date