## 2000 UNIFORM BUSINESS REPORT (UBR)

## Feb 29, 2000 8:00 am **DOCUMENT # 504809 Secretary of State** THE GLASS HOUSE SALES AND SERVICE COMPANY, INC. 02-29-2000 90135 032 \*\*\*150.00 Principal Place of Business Mailing Address 12509 ULMERTON ROAD 12509 ULMERTON RD. LARGO FL 33774-3628 LARGO FL 34644 616119 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite. Apt. #. etc. 4. FEI Number Applied For City & State City & State 59-1677408 Not Applicable Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name WHITLOW, ROBERT C Street Address (P.O. Box Number is Not Acceptable) 12509 ULMERTON ROAD **LARGO FL 34644** Zip Code FL 8. 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 (NOTE, Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition TITLE ☐ Delete TITLE NAME WHITLOW, ROBERT C. NAME STREET ADDRESS STREET ADDRESS 12509 CITY-ST-ZIP CITY-ST-ZIP LARGO FL ☐ Addition ☐ Change ☐ Delete TITLE TITLE STD NAME WHITLOW, LOIS E. NAME STREET ADDRESS 12509 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP LARGO FL -- Change Addition ☐ · Delete TITLE' -TITLE - . - -NAME JANIS A. WHITLOW NAME STREET ADDRESS STREET ADDRESS 12509 ULMERTON RD CITY-ST-ZIP CITY-ST-ZIP LARGO FL ☐ Change Addition ☐ Delete TITLE TITLE NAME EGGER, JEFFREY NAME STREET ADDRESS STREET ADDRESS 12509 CITY-ST-ZIP CITY-ST-ZIP LARGO FL ☐ Change Addition TITLE Delete TITLE ROBERTS, RICHARD NAME STREET ADDRESS STREET ADDRESS 12509 CITY-ST-ZIP CITY-ST-ZIP ARGO FI

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

TITLE NAME

STREET ADDRESS City-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

-TRUAS - 1-24-00

595-1114

Daytime Phone #

Change

Addition