FILED

2001 UNIFORM BUSINESS REPORT (UBR)

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 19, 2001 8:00 am **DOCUMENT # 504809 Secretary of State** THE GLASS HOUSE SALES AND SERVICE COMPANY, INC. 02-19-2001 90031 019 ***150.00 Principal Place of Business Mailing Address 12509 ULMERTON RD. 12509 ULMERTON ROAD LARGO FL 34644 LARGO FL 34644 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-1677408 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WHITLOW, ROBERT C Street Address (P.O. Box Number is Not Acceptable) 12509 ULMERTON ROAD **LARGO FL 34644** City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. ☐ Addition CR2E034 (10/00 ☐ Change TITLE ☐ Delete TITLE WHITLOW, ROBERT C. NAME NAME 12509 STREET ADDRESS STREET ADDRESS LARGO FL CITY-ST-7IP CITY-ST-7iP SID ☐ Addition TITLE ☐ Delete TITLE ☐ Change WHITLOW, LOIS E. NAME NAME STREET ADDRESS 12509 STREET ADDRESS LARGO FL CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Change Addition Delete TITLE_ JANIS A. WHITLOW NAME NAME 12509 ULMERTON RD STREET ADDRESS STREET ADDRESS LARGO FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition TITLE EGGER, JEFFREY NAME NAME 12509 STREET ADDRESS STREET ADDRESS LARGO FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 in changed, or on an attachment with an address, with all other MCS.