

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 13, 2006 08:00 AM
Secretary of State**

DOCUMENT # P03000140250

**1. Entity Name
ADVANTAGE GLASSWORKS INC.**



Principal Place of Business

**9289 SUNSET DRIVE
NAVARRE, FL 32566**

Mailing Address

**9289 SUNSET DRIVE
NAVARRE, FL 32566**



01092006 No Chg-P CR2E034 (11/05)

4. FEI Number

20-0435834

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**NORRIS, EYDIE S
9289 SUNSET DRIVE
NAVARRE, FL 32566**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Eydie Norris Eydie Norris

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1/11/06

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

**9. Election Campaign Financing
Trust Fund Contribution.**



**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	NORRIS, JAMES B
STREET ADDRESS	9289 SUNSET DRIVE
CITY - ST - ZIP	NAVARRE, FL 32566
TITLE	VT
NAME	NORRIS, EYDIE S
STREET ADDRESS	9289 SUNSET DRIVE
CITY - ST - ZIP	NAVARRE, FL 32566
TITLE	S
NAME	PURVIS, JEROME G
STREET ADDRESS	9289 SUNSET DRIVE
CITY - ST - ZIP	NAVARRE, FL 32566
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**000000365298
01/18/06-80010-025 150.00**

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Eydie Norris - Eydie Norris

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/11/06

DATE

850-936-4030

Daytime Phone #