

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000084931

**Entity Name:** ACUFF QUALITY GLASS L.L.C.

**Current Principal Place of Business:**

5451 LEE STREET #5  
LEHIGH ACRES, FL 33971

**Current Mailing Address:**

5451 LEE STREET #5  
LEHIGH ACRES, FL 33971 US

**FEI Number:** 80-0870253

**Certificate of Status Desired:** No

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

ACUFF, JERRY D  
421 RICHMOND AVE N.  
LEHIGH ACRES, FL 33972 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

**Authorized Person(s) Detail :**

Title MGR  
Name ACUFF, JERRY D  
Address 421 RICHMOND AVE N.  
City-State-Zip: LEHIGH ACRES FL 33972

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JERRY D ACUFF

**OWNER**

**01/12/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date