

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F08000004594

**FILED**  
**Feb 25, 2014**  
**Secretary of State**  
**CC4611713831**

**Entity Name:** AMERICAN GLASS OF TALLAHASSEE, INC.

**Current Principal Place of Business:**

215 WEST SAVANNAH AVENUE  
VALDOSTA, GA 31601

**Current Mailing Address:**

P.O. BOX 1144  
VALDOSTA, GA 31603

**FEI Number:** 90-0224938

**Certificate of Status Desired:** No

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

DAWKINS, SPENCER W  
1500-5 CAPITAL CIRCLE SE  
TALLAHASSEE, FL 32301 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

**Officer/Director Detail :**

Title	P	Title	VCVP
Name	DAWKINS, SPENCER W	Name	BARRY, DAVID W
Address	P.O. BOX 1144	Address	P.O. BOX 1144
City-State-Zip:	VALDOSTA GA 31603	City-State-Zip:	VALDOSTA GA 31603
Title	DT	Title	DS
Name	DAWKINS, LONNIE W	Name	CLANTON, WILLIAM L
Address	P.O. BOX 1144	Address	P.O. BOX 1144
City-State-Zip:	VALDOSTA GA 31603	City-State-Zip:	VALDOSTA GA 31603

*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 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 all other like empowered.*

**SIGNATURE:** SPENCER DAWKINS

**PRESIDENT**

**02/25/2014**

Electronic Signature of Signing Officer/Director Detail

Date