

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 14, 2006 08:00 AM
Secretary of State

DOCUMENT # 191777

1. Entity Name
WM. GLENN, INC.



Principal Place of Business
81
JACKSONVILLE, FL 32223 US

Mailing Address
1796 GRASSINGTON WAY S
JACKSONVILLE, FL 32223



04102006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-0965783	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROBERTS, ANN M
1796 GRASSINGTON WAY ST
JACKSONVILLE, FL 32223

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 *Ann Michelle Roberts, President*

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

(NOTE: Registered Agent signature required when reinstating)

4/11/06
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**

11111111508543
04/28/06-80009-001 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	ROBERTS, ANN M
STREET ADDRESS	1796 GRASSINGTON WAY S
CITY-ST-ZIP	JACKSONVILLE, FL 32223

TITLE	S
NAME	DELONG, GORDON RICHARD
STREET ADDRESS	1796 GRASSINGTON WAY S
CITY-ST-ZIP	JACKSONVILLE, FL 32223

TITLE	
NAME	
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CITY-ST-ZIP	

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CITY-ST-ZIP	

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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: *Ann Michelle Roberts, President* 4/11/06 (904) 553-4040
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #