

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 337587

FILED
Mar 19, 2009
Secretary of State

Entity Name: MAULDIN'S AUTO GLASS, INC.

Current Principal Place of Business:

323 NW 6TH ST
PO BOX 634
GAINESVILLE, FL 326020634

New Principal Place of Business:

323 NW 6TH ST
GAINESVILLE, FL 32601

Current Mailing Address:

323 NW 6TH ST
PO BOX 634
GAINESVILLE, FL 326020634

New Mailing Address:

PO BOX 634
GAINESVILLE, FL 326020634 US

FEI Number: 59-1222945

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAULDIN, JERRY L
323 NW 6 ST
GAINESVILLE, FL 32601 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MAULDIN, JERRY L
Address: 323 NW 6 ST
City-St-Zip: GAINESVILLE, FL

Title: V () Delete
Name: COPELAND, B. C
Address: 323 NW 6 ST
City-St-Zip: GAINESVILLE, FL

Title: ST () Delete
Name: HARRIS, SHEILA M
Address: 323 NW 6 ST
City-St-Zip: GAINESVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MAULDIN, JERRY L
Address: 323 NW 6 ST
City-St-Zip: GAINESVILLE, FL 32601 US

Title: V (X) Change () Addition
Name: COPELAND, B. C
Address: 323 NW 6 ST
City-St-Zip: GAINESVILLE, FL 32601 US

Title: ST (X) Change () Addition
Name: HARRIS, SHEILA M
Address: 323 NW 6 ST
City-St-Zip: GAINESVILLE, FL 32601 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: SHEILA M. HARRIS

S/T

03/19/2009

Electronic Signature of Signing Officer or Director

Date