


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2008 08:00 AM
Secretary of State

DOCUMENT # 543394 1. Entity Name PROFESSIONAL GLASS, INC.	
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Principal Place of Business 12232 HAZEN AVE. THONOTOSASSA, FL 33592 US	Mailing Address P.O. BOX 1470 THONOTOSASSA, FL 33592 US
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

BAKER, STANLEY W
6005 ADAGIO LANE
APOLLO BEACH, FL 33572

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 _____ (NOTE: Registered Agent signature required when reinstating)
Signature, typed or printed name of registered agent and title if applicable. DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BAKER, STANLEY 6005 ADAGIO LANE APOLLO BEACH, FL 33572
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HENCHEY, ROBERT M. 4452 HANSEN TRAIL BROOKSVILLE, FL 34604
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TSD CURTIS, BETTY DALE 8217 TODD PLACE PLANT CITY, FL 33565
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: Betty Dale Curtis BETTY DALE CURTIS TSD Feb 21, 2008 813-986-3111
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #