## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(1)

**DOTHAN GLASS COMPANY** 

## **FILED** May 04 1998 8:00am Secretary of State



Principal Place of Business Mailing Address  SER 9 DATES STREET										
855 \$ OATES STREET   605 \$. OATES STREET   P.O. BOX 1308   P.O. BOX 1308							DO NOT WRITE IN THIS SPACE			
DOTHAN AL 36302		DOTHAN AL 36	DOTHAN AL 36302							
U\$							3. Date Incorporated or 03/09/1962	Qualified		
2. Principal Place o	f Business	2a. Mailing Add	2a. Mailing Address				4. FEI Number			Applied For
21		26					63-0367812			Not Applicable
Suite, Apt. #, etc.		27					5. Certificate of Status D	esired		5 Additional Required
City & State		City & State	<b>├</b> ─┐				6. Election Campaign Financing \$5.00 May Be			
<b>23</b> Zip	Country	28 Zip		ountry			Trust Fund Contribution			ed to Fees
		<b> </b>	<u>├─</u> ¬	ountry	,		8. This corporation owes		urrent year Yes	Intangible No
24	25 Name and Address of Cur	29 29 Agent	30				Personal Property Tax 10. Name and Address of			<u> </u>
	EARL G., JR.	TOTAL TION OF THE PARTY.		81	1	Varne	10. 1101110 0110 71201000 1	Tion Hogistore	a regoin	1-1
3901 N PALAFOX ST.					L					···
	OLA FL 32523					street Addres	ss (P.O. Box Number is Not	Acceptable)		
Literio	ODITE ODDEO			83	$\vdash$	<del></del>				
					١.					
				84	(	City		F	85 Z	ip Code
11. Pursuant to the	provisions of Sections 607.0	502 and 607 1508 Flori	da Statutes, the	abov	 e-n.	amed corpo	ration submits this statemer			n its registered
office or registe	red agent, or both, in the Stilliar with, and accept the ob-	ate of Horida. Such char	ige was authoriz	ed by	v 1h	e corporatio	n's board of directors. I her	eby accept the a	pointment	as registered
•	illiar with, and accept the ob	ligations of, Section 607.	.0505, Florida Si	alute	S.					
SIGNATURE	re, typed or profed name of registered	agent and the if applicable	(NOTE Registe	red Age	ent s	gnature required	when reinstating)	DATE		
12.	OFFICERS /	ND DIRECTORS	13	i.			ADDITIONS/CHANGES	TO OFFICERS A	ND DIRECT	ORS IN 12
TITLE		[] DI	LETE 1.1	TITLE					Chang	e Addition
	TMAN,E.G.,JR.		1.2	NAME		}				
	09 AZURE DR.		1.3	STREET	T ADE	DRESS				
CITY-ST-ZIP DC	OTHAN AL		1.4	CITY-S	S1-Z	1P				
TITLE		DI	LETE 2.1	TITLE					☐ Chang	e 🔲 Addition
NAME			2.2	NAME						
STREET ADDRESS			2.3	STREET	I ADO	DRESS				
CITY-ST-ZIP				CITY-	ST-Z	/(P				. <del></del>
TITLE		L] DI	ELETE 3.1	TITLE					Chang	je 🔲 Addition
NAME			32	NAME						
STREET ADORESS			33	STREET	ADI	ORESS				
CITY-ST-ZIP		······		. CITY-	ST - Z	<u>MP</u>				
TITLE		[_] D8		TITLE					L Chang	e 🔲 Addition
NAME			· ·	NAME						
STREET ADDRESS				STREET						
CITY-ST-ZIP				CITY-S	37 - Z	IP				
TITLE		□ DE		TITLE					☐ Chang	e L. Addition
NAME				NAME		İ				
STREET ADDRESS			5.3	STREET	(ADC	DRESS				
CITY-ST-ZIP		TT		CITY-S	ST - Z	IP				
TITLE		. D€	<b>I</b>	TITLE					Chang	e Addition
NAME				NAME						
STREET ADDRESS			6.3	STREET	ADE	)ress				
CITY-ST-ZIP				CITY - S				<del> </del>		
14. I hereby certify :	that the information sumplied	I with this filing does not	quality for the e	vemn	MICE	a stated in S/	ection 119 07/3)(i). Florida 9	statutes I further a	certify that t	no information

Indicated on this annual report or supplied will this ming does not quality for the exemption stated in Section 119.07(3)(1). Florida Statutes. Further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changing, on an attachment with an address.

4-24-98

334-793-1161