## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000006314

Entity Name: GLOCK, INC.

FILED Mar 01, 2004 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
6000 HIGH SMYRNA,	ILANDS PARK' GA 30082	WAY			
Current Mailing Address:			New Mailir	New Mailing Address:	
6000 HIGH SMYRNA,	ILANDS PARK' GA 30082	WAY			
FEI Number:	58-1652822	FEI Number Applied For ( )	FEI Number Not Appli	icable ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name				Address of New Registered Agent:	
1200 SOU <sup>-</sup>	ORATION SYS TH PINE ISLAN ON, FL 33324				
The above in the State		ubmits this statement for the purp	oose of changing it	ts registered office or registered agent, or both,	
SIGNATUF					
	Electroni	ic Signature of Registered Agent		Date	
Election Can	npaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	VS () GLOCK, ROBER 6000 HIGHLAND SMYRNA, GA 3	) PARKWAY	Title: Name: Address: City-St-Zip:	SEC (X) Change ( ) Addition GLOCK, ROBERT 6000 HIGHLANDS PARKWAY SMYRNA, GA 30082	
Title: Name: Address: City-St-Zip:	MANOWN, PETE	E DUNWOODY ROAD	Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition GLOCK, ROBERT 6000 HIGHLANDS PARKWAY SMYRNA, GA 30082	
Title: Name: Address: City-St-Zip:	PD () QUENDLER, JO HAUSFELDSTR, DEUTCH - WAG	ASSE 7A2232	Title: Name: Address: City-St-Zip:	PRES (X) Change ( ) Addition QUENDLER, JOHANN DR NELKENGASSE 3, A-2232 DEUTCH - WAGRAM, AUSTRIA, BJ A-2232	
Title: Name: Address: City-St-Zip:	( )	Delete	Title: Name: Address: City-St-Zip:	DIR ( ) Change (X) Addition QUENDLER, JOHANN DR NELKENGASSE 3, A-2232 DEUTCH-WAGRAM, AUSTRIA, BJ A-2232	
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Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	TRES ( ) Change (X) Addition QUENDLER, JOHANN DR NELKENGASSE 3, A-2232 DEUTCH-WAGRAM, AUSTRIA, BJ A-2232	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT GLOCK SEC 03/01/2004