

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003807

FILED
Jan 06, 2009
Secretary of State

Entity Name: AUTO & TRUCK GLASS, INC.

Current Principal Place of Business:

2300 HARMON ROAD
AUBURN HILLS, MI 48326

New Principal Place of Business:

Current Mailing Address:

2300 HARMON ROAD
AUBURN HILLS, MI 48326

New Mailing Address:

FEI Number: 86-1055036

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INCORPORATING SERVICES, LTD.
1540 GLENWAY DR.
TALLAHASSEE, FL 32301 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: PCEO () Delete
Name: VORIS, MICHAEL
Address: 2300 HARMON ROAD
City-St-Zip: AUBURN HILLS, MI 48326

Title: DS () Delete
Name: JAFFE, DAVID B.
Address: 2300 HARMON ROAD
City-St-Zip: AUBURN HILLS, MI 48326

Title: VP () Delete
Name: ERWIN, JOHN
Address: 2300 HARMON ROAD
City-St-Zip: AUBURN HILLS, MI 48326

Title: CD () Delete
Name: WILSON, CHARLES
Address: 2300 HARMON ROAD
City-St-Zip: AUBURN HILLS, MI 48326

Title: D () Delete
Name: KNIGHT, JEFFREY A.
Address: 2300 HARMON ROAD
City-St-Zip: AUBURN HILLS, MI 48326

Title: D () Delete
Name: DAVIS, D. JAMES
Address: 2300 HARMON ROAD
City-St-Zip: AUBURN HILLS, MI 48326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DAVID B. JAFFE

DS

01/06/2009

Electronic Signature of Signing Officer or Director

Date