


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 25, 2004 08:00 AM
Secretary of State

DOCUMENT # F99000001661 1. Entity Name AMA GLASS CORPORATION	
---	---

Principal Place of Business
1400 LINCOLN STREET
KINGSPORT, TN 37660

Mailing Address
2201 WATER RIDGE PARKWAY
STE 400
CHARLOTTE, NC 28210



02192004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 33-0291553	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

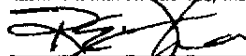
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD LANTZ, RANDY 1400 LINCOLN STREET KINGSPORT, TN
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CORRENTI, CHRIS 1400 LINCOLN STREET KINGSPORT, TN 37660
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T BEGLEY, WAYNE 1400 LINCOLN STREET KINGSPORT, TN
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LADD, DORIS 1400 LINCOLN STREET KINGSPORT, TN 37660
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V DOBIE, ROBERT E 2201 WATER RIDGE PKWY STE 400 CHARLOTTE, NC
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S CORRENTI, CHRIS 1400 LINCOLN STREET KINGSPORT, TN 37660

U000000036003
03/25/04-80011-013 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

 **Robert E. Dobie**

3/16/04

Date

704-329-7427

Daytime Phone #