2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G28577

City-St-Zip:

DELTONA, FL 32738

SEMINOLE GLASS COMPANY. INC

FILED Apr 28, 2004 Secretary of State

Entity Nai	me: SEMINO	LE GLASS COMPANY, INC.			
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
117 LONGWOOD AVENUE ALTAMONTE SPRINGS, FL 32701				2741 S. RONALD REGAN BLVD. ALTAMONTE SPRINGS, FL 32701	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
P.O. BOX ALTAMON	150490 ITE SPRINGS	, FL 32715			
FEI Number	: 59-2400827	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
861 MOON	S, CHARLY NGATE TERRA FL 32725	ACE US			
	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	I office or registered agent, or both,	
SIGNATU	RE:				
	Electron	nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (MESKENS, CH 861 MOONGAT DELTONA, FL	TE TERRACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (MESKENS, DIA 861 MOONGAT DELTONA, FL	TE TERR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	ST (RAYMAN, BOB 2327 MONTAN		Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: DIANA MESKENS VP 04/28/2004