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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 14 1997 8:00am

Secretary of State

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Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G81656

(2)

SMITH GLASS, INC.

SIGNATURE:

Principal Place 16051 O'NEAL I N. FT. MYERS F	DR.	Mailing Address 16051 O'NEAL DR. N. FT. MYERS FL 33903-2212							
						3. Date Incorporated or Qualified 11/14/1983		e of Last 6/1996	
2. Principal Pl	2a. Mailing Address	Address			4. FEI Number			Applied For	
21		26				59-2355131	Not Applicable		
Suite, Apt.	#, etc.	₁	Suite Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required			
City & State		City & State							
23	· ·	28				Election Campaign Financing Trust Fund Contribution			May Be
Zip	Country	Zip	Cou	intry		8. This corporation has liability for in			
24	25	29	30	•		· · · · · · · · · · · · · · · · · · ·	. ~	No	D. 100.00E.
	9. Name and Address of Cu					10. Name and Address of New Reg	istered A	gent	
SMIT	'H, HENRY O'NEAL			81	Name				•
1605	1 O'NEAL DR.			82	Street Add	ress (P.O. Box Number is Not Acceptable	le)		***************************************
N. F	T. MYERS FL 33903			-	01100171013	Total Control of the Market	,		
				83					
				84	City			85 Z	p Code
				04	Olly		FL	63 -	p code
SIGNATURE	nifamiliar with, and accept the dissipative, type for punish managed each	Lager a of the diappurates (NC)TE Hegistere			red whon remstating:	DATE		000 IV 40
12.	OFFICERS	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECT:	
TITLE	SMITH, HENRY O.	☐ DELETE	1.1 11					unang	a Monton
NAME	16051 O'NEAL DR.		12 N/		*COULS.				
STREET ADDRESS CITY-ST-ZIP	N. FT. MYERS FL				ADDRESS T-ZIP				
TITLE	P	DELETE	2.1 TI		1-21			Chano	e Addition
NAME	SMITH, HENRY O.		2.2 N/						_
STREET ADORESS	16051 O'NEAL DR.				ADDRESS				
CITY-ST-ZIP	N. FT. MYERS FL		2.4 C	HTY - 9	ST-ZIP				
TITLE		☐ DELETE	3 1 T(TLE.				Chang	e Addition
NAME			3.2 N	AME					
STREET ADDRESS			3.3 S	TREET	ADDRESS				
CITY ST-ZIP					ST - ZIP				
T:TLE		L DELETE	4.1 T	TLE				Chang	e L Addition
NAME			4. 2 N						
STREET ADDRESS					ADDRESS				
CITY -SI - 7IP		DOLETE			I-ZIP			Chanc	n Addition
TITLE		L DELETE	51 Ti					Chang	je <u> </u>
NAME cross s aborec			52 N		Annosco				
STREET ADDRESS			1		ADDRESS				
CHTY+S1+ZIP THILE		DELETE	611		T-ZIP			Chang	e Addition
NAME		Barrell Service to 1 to	62 N						
STREET ADORESS			1		ADDRESS				
CITY-SI-ZIP					T-ZIP				
14. I do herel	by certify that the information sup	plied with this filing ooes not qua	alify for the	exe	mption state	ed in Section 119.07(3)(i), Florida Statutes	s. I further	certify th	at the
informatic Lam an o	on indicated on this annual report ifficer or director of the corporation	or supplemental annual report is in or the receiver or trustee empo	s true and a owered to e	accu exec	arate and that tute this repo	at my signature shall have the same lega ort as required by Chapter 607, Florida S	i ettect as tatutes; ar	it made id that m	under oath; tha ly name