

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H17385

FILED
Jan 24, 2005
Secretary of State

Entity Name: AMELIA GLASS & BUILDING SUPPLIES, INC.

Current Principal Place of Business:

1951 S 8TH ST
PO BOX 912
FERNANDINA BEACH, FL 32035 US

New Principal Place of Business:

Current Mailing Address:

1951 SOUTH 8TH ST
PO BOX 912
FERNANDINA BEACH, FL 32035 US

New Mailing Address:

FEI Number: 59-2431801 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

COLLINS, DANIEL J.
1900 S. 8TH ST
FERNANDINA BEACH, FL 32034 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: PD () Delete
Name: COLLINS, DANIEL J
Address: 101 SOUTH 17TH
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: ST () Delete
Name: BARKER COLLINS, ANN
Address: 101 SOUTH 17TH
City-St-Zip: FERNANDINA BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: DANIEL J. COLLINS, SR

PRES

01/24/2005

Electronic Signature of Signing Officer or Director

_____ Date