

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H94584

FILED
Apr 08, 2009
Secretary of State

Entity Name: GOLDEN GLASS & MIRROR, INC.

Current Principal Place of Business:

605 NW 53RD AVE
SUITE A--4
GAINESVILLE, FL 32609 US

New Principal Place of Business:

Current Mailing Address:

605 NW 53RD AVENUE
SUITE A-4
GAINESVILLE, FL 32609 US

New Mailing Address:

605 NW 53RD AVE
SUITE A--4
GAINESVILLE, FL 32609 US

FEI Number: 59-2654338

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEFFENBAUGH, GEORGE
605 NW 53RD AVENUE, SUITE A-4
GAINESVILLE, FL 32609 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: DPT () Delete
Name: DEFFENBAUGH, GEORGE
Address: 114 MCMEEKIN LAKE LANE
City-St-Zip: HAWTHORNE, FL 32640

Title: DVS () Delete
Name: FULGHAM, MARVIN D.
Address: 605 NW 53RD AVE SUITE A-4
City-St-Zip: GAINESVILLE, 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 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: GEORGE DEFFENBAUGH

DPT

04/08/2009

Electronic Signature of Signing Officer or Director

_____ Date