

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000095977

FILED
Aug 05, 2008
Secretary of State

Entity Name: GLASS SERVICES OF THE SOUTH, L.L.C.

Current Principal Place of Business:

6310 N PALAFOX ST
PENSACOLA, FL 32503

New Principal Place of Business:

Current Mailing Address:

6310 N PALAFOX ST
PENSACOLA, FL 32503

New Mailing Address:

FEI Number: 20-3665466 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

LINTNER, BARRY J
4278 BREVITY BLVD
GULF BREEZE, FL 32563 US

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: EMERSON, MARSHALL
Address: 917 GONDOLIER RD
City-St-Zip: GULF BREEZE, FL 32563

Title: MGRM () Delete
Name: CAMBRE, THOMAS E
Address: 9115 POINTE CYPRESS DR
City-St-Zip: ORLANDO, FL 32836

Title: MGRM () Delete
Name: LINTNER, BARRY J
Address: 4278 BREVITY BLVD
City-St-Zip: GULF BREEZE, FL 32563

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BARRY LINTNER

MGRM

08/05/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date