


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2004 08:00 AM
Secretary of State

DOCUMENT # M72836
 1. Entity Name
 NORTH FLORIDA GLASS & MIRROR, INC.



Principal Place of Business 10 NW 2ND ST HIGH SPRINGS, FL 32643 US	Mailing Address PO BOX 1376 ALACHUA, FL 32616
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DO NOT WRITE IN THIS SPACE



01192004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2878424	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 STARK, CHARLES F.
 11718 NW 157 ST
 ALACHUA, FL 32615

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

U00000111467
 04/13/04-80018-010 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY ST ZIP	P STARK, CHARLES F. 11718 NW 157ST ALACHUA, FL 32615
TITLE NAME STREET ADDRESS CITY ST ZIP	V STARK, DEBORAH M. 11718 NW 157ST ALACHUA, FL 32615
TITLE NAME STREET ADDRESS CITY ST ZIP	S JOHNSON, CHAD 15704 NW 118 PL. ALACHUA, FL 32615
TITLE NAME STREET ADDRESS CITY ST ZIP	T JOHNSON, VIRGINIA 15704 NW 118 PL. ALACHUA, FL 32615
TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Charles F. Stark **4/12/04** (386) 454-3966
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #