

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 14, 2000 8:00 am
Secretary of State

02-14-2000 90034 050 ****70.00

DOCUMENT # N03752

1. Entity Name

GLASS ASSOCIATION OF FLORIDA, INC.

Principal Place of Business

Mailing Address

PO BOX 950368
LAKE MARY FL 32746
US

169 CONNESTEE TRAIL
BREVARD NC 28712-9008
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SUMMERS, GARY
WILLIAM, SMITH AND SUMMERS, PA
380 W ALFRED ST
TAVARES FL 32778-3206

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEES IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PST
CARSON, WILLIAM B
169 CONNESTEE TRAIL
BREVARD NC 28712 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SAME ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CH
LABADIE, LARRY
4388 US HWY 1
VERO BEACH FL 32967 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D-
Plaster, Wayne
P.O. Box-271429
Tampa, Florida 33688-1429 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
DOWNS, TERRY
1100 SOUTH RIO GRANDE AVE
ORLANDO FL 32805 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Vice CH
Same ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HERBERT, DAVE
3700 ST JOHNS INDUSTRIAL PKWY
JACKSONVILLE FL 32246 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CH
Same ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HANSEN, CHRIS
1161 SUN CENTURY RD STE 1
NAPLES FL 34110 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SAME ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
TRIMBLE, TIM
6600 SUEMAC PLACE
JACKSONVILLE FL 32254-2773 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Whiddon, Don
1617 S. Monroe St.
Tallahassee, Florida 32301 ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 617, 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:

William B. Carson
WILLIAM B. CARSON

2/8/2000 8888697961

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)