

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 91289 011 ****61.25

DOCUMENT # N43635

1. Entity Name

CENTRAL FLORIDA GLASSAHOLICS, INC.



Principal Place of Business

BOX 2319
LAKELAND FL 33806

Mailing Address

BOX 2319
LAKELAND FL 33806

14009240



MOORE CR2E037 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-2436660

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JACOBSON, CHARLES E
3425 IMPERIAL LANE
LAKELAND FL 33813

7. Name and Address of New Registered Agent

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

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE VD ☒ Delete
NAME GILES, JOANN
STREET ADDRESS 400 GRIMES DR
CITY-ST-ZIP AUBURNDAL FL 33823

TITLE PD ☐ Delete
NAME GILLEWATER, RICHARD
STREET ADDRESS 4709 KIMBALL CT. W
CITY-ST-ZIP LAKELAND FL 33813

TITLE TD ☐ Delete
NAME PETTEWAY, RALEIGH
STREET ADDRESS 5336 GLENMORE DR
CITY-ST-ZIP LAKELAND FL 33813

TITLE RSD ☒ Delete
NAME QUICK, BARBARA
STREET ADDRESS 2975 SHINGLE CREEK COURT
CITY-ST-ZIP KISSIMMEE FL 34746

TITLE GSD ☒ Delete
NAME EISSMAN, JEAN
STREET ADDRESS 704 LAUREL LANE
CITY-ST-ZIP LAKELAND FL 33813

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VD ☐ Change ☒ Addition
NAME Cantrall, Cheryl
STREET ADDRESS 5319 Sandra Way
CITY-ST-ZIP Lakeland, FL 33813

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

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

TITLE RSD ☐ Change ☒ Addition
NAME Talbot, Mildred
STREET ADDRESS 87 Lake Pointe Drive
CITY-ST-ZIP Mulberry, FL 33860

TITLE CSD ☐ Change ☒ Addition
NAME Eissman, Jean
STREET ADDRESS 704 Laurel Lane
CITY-ST-ZIP Lakeland, FL 33813

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

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 *Richard Gillenwater* (Richard Gillenwater) April 22, 2004 (863) 834-6994

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #