

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000045839

FILED
Mar 16, 2009
Secretary of State

Entity Name: UNIVERSAL GLASS & MIRROR, INC.

Current Principal Place of Business:

1200 OGDEN ROAD
3
VENICE, FL 34285 US

New Principal Place of Business:

Current Mailing Address:

1200 OGDEN ROAD
3
VENICE, FL 34285 US

New Mailing Address:

FEI Number: 65-1004311 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOGFORD, EDMUND III
621 GRANADA AVE
VENICE, FL 34285 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: PD () Delete
Name: MOGFORD, EDMUND C III
Address: 621 GRANADA AVE
City-St-Zip: VENICE, FL 34285 US

Title: VD () Delete
Name: MOGFORD, EDMUND C JR
Address: 613 GRANADA AVE
City-St-Zip: VENICE, FL 34285 US

Title: SD () Delete
Name: MOGFORD, MARTIN S SD
Address: 332 SHORE RD
City-St-Zip: VENICE, FL 34285 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: MOGFORD, MARTIN S
Address: 332 SHORE RD
City-St-Zip: VENICE, FL 34285 US

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: EDMUND MOGFORD III

PD

03/16/2009

Electronic Signature of Signing Officer or Director

_____ Date