2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2007
Secretary of State

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Entity Name: GRIMES 'N GLASS, INC.

Current Principal Place of Business:

273940 MURRHEE ROAD
P O BOX 0552
HILLIARD, FL 320466659 US

New Principal Place of Business:

273940 MURRHEE ROAD
HILLIARD, FL 320466659 US

Current Mailing Address:

PO BOX 0552
273940 MURRHEE ROAD
HILLIARD, FL 320466659 US

New Mailing Address:

FEI Number: 59-3761027 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRIMES, VICTOR R
273940 MURRHEE ROAD
P O BOX 0552
HILLIARD, FL 320466659 US

Name and Address of New Registered Agent:

GRIMES, VICTOR R
273940 MURRHEE ROAD
HILLIARD, FL 320466659 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: _____ 04/29/2007
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: GRIMES, VICTOR R
Address: P O BOX 0552-273940 MURRHEE ROAD
City-St-Zip: HILLIARD, FL 320466659 US

Title: DT ( ) Delete
Name: GRIMES, MARY E
Address: P O BOX 0552-273940 MURRHEE ROAD
City-St-Zip: HILLIARD, FL 320466659 US

Title: DS ( ) Delete
Name: BLAIR, THOMAS A
Address: P.O. BOX 1670 - 54025 JEANNIE RD
City-St-Zip: CALLAHAN, FL 320111670 US

Title: VP ( ) Delete
Name: COURCHENE, JOSHUA A
Address: P O BOX 0552-273940 MURRHEE RD
City-St-Zip: HILLIARD, FL 320466659

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: VICTOR R. GRIMES PRES 04/29/2007
Electronic Signature of Signing Officer or Director — Date