

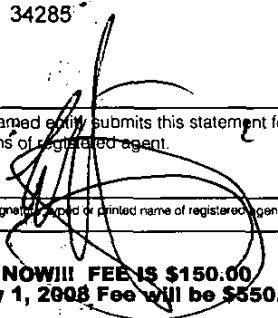


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 22, 2008 8:00 am**  
**Secretary of State**

01-22-2008 90048 013 \*\*\*150.00

<b>DOCUMENT # P01000119424</b>					
<b>1. Entity Name</b> HERITAGE GLASS, INC.					
<b>Principal Place of Business</b> 504 E. VENICE AVE VENICE, FL 34285 US			<b>Mailing Address</b> 504 E. VENICE AVE VENICE, FL 34285 US		
<b>2. Principal Place of Business - No P.O. Box #</b> 1200 Ogden Rd.		<b>3. Mailing Address</b> 1200 Ogden Rd.		 01062008 Chg-P CR2E034 (12/06)	
Suite, Apt. #, etc. #3		Suite, Apt. #, etc. #3			
City & State Venice FL		City & State Venice FL			
Zip 34285		Country USA		<b>4. FEI Number</b> 65-1156324	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>					
<b>6. Name and Address of Current Registered Agent</b> MOGFORD, EDMUND C JR. 504 E VENICE AVE VENICE, FL 34285			<b>7. Name and Address of New Registered Agent</b> Name: (Same) Mogford, Edmund C. JR. Street Address (P.O. Box Number is Not Acceptable): 1200 Ogden Rd. #3 City: Venice FL Zip Code: 34285		
<b>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.</b> SIGNATURE:  DATE: 1/16/08 <small>Signature required or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>			<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
<b>TITLE</b> PD <b>NAME</b> MOGFORD, EDMUND C JR <b>STREET ADDRESS</b> 613 GRANADA AVE. <b>CITY-ST-ZIP</b> VENICE, FL 34285	<input type="checkbox"/> Delete		<b>TITLE</b> D Mogford, Martin <b>STREET ADDRESS</b> 332 Shore Road <b>CITY-ST-ZIP</b> Venice, FL 34285	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
<b>TITLE</b> TD <b>NAME</b> MUECKE, DONALD J <b>STREET ADDRESS</b> 9102 L'PAVIA BLVD. <b>CITY-ST-ZIP</b> VENICE, FL 34292	<input type="checkbox"/> Delete		<b>TITLE</b> D Preece, Erin <b>STREET ADDRESS</b> 2192 Mesic Hammock way <b>CITY-ST-ZIP</b> Venice, FL 34292	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
<b>TITLE</b> SD <b>NAME</b> DARRELL, PRUITT <b>STREET ADDRESS</b> 1325 PINEBROOK WAY <b>CITY-ST-ZIP</b> VENICE, FL 34285	<input type="checkbox"/> Delete		<b>TITLE</b> VD Mogford, Edmund C III <b>STREET ADDRESS</b> 621 Granada Ave <b>CITY-ST-ZIP</b> Venice FL 34285	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> D <b>NAME</b> MUECKE, DANE <b>STREET ADDRESS</b> 601 GRANADA AVE <b>CITY-ST-ZIP</b> VENICE, FL 34285	<input type="checkbox"/> Delete		<b>TITLE</b> D MUECKE, PETER <b>STREET ADDRESS</b> 2326 FREDERICK <b>CITY-ST-ZIP</b> VENICE, FL 34292	<input type="checkbox"/> Change <input type="checkbox"/> Addition	

**12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #