

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000041193

FILED
Aug 06, 2008
Secretary of State

Entity Name: ARCHITECTURAL GLASS & DESIGN, INC.

Current Principal Place of Business:

100 NINA CT
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

400 S. PINE ST.
NEW SMYRNA BEACH, FL 32169

Current Mailing Address:

100 NINA CT
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

400 S. PINE ST.
NEW SMYRNA BEACH, FL 32169

FEI Number: 11-3684467

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEST, WENDY PRES.
100 NINA CT
PONTE VEDRA BEACH, FL 32082 US

Name and Address of New Registered Agent:

WEST, WENDY PRES.
400 S. PINE ST.
NEW SMYRNA BEACH, FL 32169 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:

08/06/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WEST, WENDY
Address: 100 NINA CT
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: S () Delete
Name: OCTAVI, JUSTIN
Address: 100 NINA CT
City-St-Zip: PONTE VEDRA BEACH, FL 32082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WEST, WENDY
Address: 400 S. PINE ST.
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: S (X) Change () Addition
Name: OCTAVI, JUSTIN
Address: 400 S. PINE ST.
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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: WENDY WEST

P

08/06/2008

Electronic Signature of Signing Officer or Director

Date