

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000048122

FILED
Feb 12, 2009
Secretary of State

Entity Name: DARREN THOMAS GLASS COMPANY, INC.

Current Principal Place of Business:

812 US HWY 27 N UNIT 5
SEBRING, FL 338702160

New Principal Place of Business:

812 US HWY 27 NORTH
UNIT #4
SEBRING, FL 33872

Current Mailing Address:

812 US HWY 27 N UNIT 5
SEBRING, FL 338702160

New Mailing Address:

P.O. BOX 7822
SEBRING, FL 33872

FEI Number: 20-8841646

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEER, JOHN E
1142 OLD FT GREEN RD
WAUCHULA, FL 338737710 US

Name and Address of New Registered Agent:

THOMAS, DARREN W
812 US HWY 27 NORTH
UNIT # 4
SEBRING, FL 33872 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: DARREN W THOMAS

02/12/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: THOMAS, DARREN W
Address: P.O. BOX 502
City-St-Zip: SEBRING, FL 33871

Title: VP () Delete
Name: DEER, JOHN E
Address: 1142 OLD FT GREEN RD
City-St-Zip: WAUCHULA, FL 338737710

Title: T () Delete
Name: THOMAS, DARREN W
Address: P. O. BOX 502
City-St-Zip: SEBRING, FL 33871

Title: S () Delete
Name: DEER, JOHN E
Address: 1142 OLD FT GREEN RD
City-St-Zip: WAUCHULA, FL 338737710

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: THOMAS, DARREN W
Address: P.O. BOX 7822
City-St-Zip: SEBRING, FL 33872

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

Title: T (X) Change () Addition
Name: THOMAS, DARREN W
Address: P. O. BOX 7822
City-St-Zip: SEBRING, FL 33872

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: DARREN W THOMAS

P

02/12/2009

Electronic Signature of Signing Officer or Director

Date