

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000053167

FILED
Apr 30, 2009
Secretary of State

Entity Name: SUPERIOR AUTO GLASS OF TAMPA BAY, INC.

Current Principal Place of Business:

1612 STONEHAVEN WAY
TARPON SPRINGS, FL 34689

New Principal Place of Business:

1612 STONEHAVEN WAY
TARPON SPRINGS, FL 34689 US

Current Mailing Address:

1612 STONEHAVEN WAY
TARPON SPRINGS, FL 34689

New Mailing Address:

1612 STONEHAVEN WAY
TARPON SPRINGS, FL 34689 US

FEI Number: 26-2720584

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMBENSY, LINDA M
1612 STONEHAVEN WAY
TARPON SPRINGS, FL 346893060 US

Name and Address of New Registered Agent:

ROLLINSON, LINDA M
1612 STONEHAVEN WAY
TARPON SPRINGS, FL 346893060 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: LINDA M. ROLLINSON

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: CAMBENSY, LINDA M
Address: 1612 STONEHAVEN WAY
City-St-Zip: TARPON SPRINGS, FL 346893060

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: ROLLINSON, LINDA M
Address: 1612 STONEHAVEN WAY
City-St-Zip: TARPON SPRINGS, FL 346893060

Title: SECT () Change (X) Addition
Name: ROLLINSON, DANIELLE L
Address: 1612 STONEHAVEN WAY
City-St-Zip: TARPON SPRINGS, FL 346893060

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: LINDA M ROLLINSON

PSTD

04/30/2009

Electronic Signature of Signing Officer or Director

Date