2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2009
Secretary of State

DOCUMENT# P08000101986

Entity Name: STOCKBARGER GLASS, INC.

Current Principal Place of Business:

1405 ALGIERS ST
PORT CHARLOTTE, FL 33980 US

New Principal Place of Business:

24050 TISEO BLVD UNIT 1
PORT CHARLOTTE, FL 33980 US

Current Mailing Address:

1405 ALGIERS ST
PORT CHARLOTTE, FL 33980 US

New Mailing Address:

FEI Number: 80-0298665 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STOCKBARGER, JACKIE
1405 ALGIERS ST
PORT CHARLOTTE, FL 33980 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: STOCKBARGER, SPENSER
Address: 1405 ALGIERS ST
City-St-Zip: PORT CHARLOTTE, FL 33980 US

Title: VD ( ) Delete
Name: STOCKBARGER, JACKIE
Address: 1405 ALGIERS ST
City-St-Zip: PORT CHARLOTTE, FL 33980 US

Title: S ( ) Delete
Name: MANSFIELD, WILLIAM
Address: 127 SW 57TH TERR
City-St-Zip: CAPE CORAL, FL 33914 US

Title: T ( ) Delete
Name: ZANBRANO, RAMON
Address: 6006 SLADE RD
City-St-Zip: NORT PORT, FL 34287 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: STOCKBARGER, SPENSER
Address: 1405 ALGIERS ST
City-St-Zip: PORT CHARLOTTE, FL 33980 US

Title: VP (X) Change ( ) Addition
Name: STOCKBARGER, JACKIE
Address: 1405 ALGIERS ST
City-St-Zip: PORT CHARLOTTE, FL 33980 US

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

Title: T (X) Change ( ) Addition
Name: ZAMBRANO, RAMON
Address: 6006 SLADE RD
City-St-Zip: NORT PORT, FL 34287 US

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: JACKIE STOCKBARGER VP 01/14/2009
Electronic Signature of Signing Officer or Director Date