

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P24137

FILED  
Jul 17, 2006  
Secretary of State

Entity Name: RAY GLASS BATTERIES, INC.

**Current Principal Place of Business:**

1506 EAST JACKSON STREET  
THOMASVILLE, GA 317923998

**New Principal Place of Business:**

**Current Mailing Address:**

1506 EAST JACKSON STREET  
THOMASVILLE, GA 317923998

**New Mailing Address:**

FEI Number: 58-1449137

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GLASS, ROBBY  
3210 APALACHEE PARKWAY  
TALLAHASSEE, FL 32301 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: GLASS, B. RAY,  
Address: 188 PATTERSON STILL SPUR EAST  
City-St-Zip: THOMASVILLE, GA

Title: VD ( ) Delete  
Name: GLASS, BOBBY RAY, JR., .  
Address: 499 FRADONIA RD  
City-St-Zip: THOMASVILLE, GA

Title: STD ( ) Delete  
Name: GLASS, VIVIEN W.,  
Address: 188 PATTERSON STILL SPUR EAST  
City-St-Zip: THOMASVILLE, GA 31757

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: GLASS, B. RAY,  
Address: 188 PATTERSON STILL SPUR EAST  
City-St-Zip: THOMASVILLE, GA 31757

Title: VD (X) Change ( ) Addition  
Name: GLASS, BOBBY RAY, JR., .  
Address: 499 FREDONIA RD  
City-St-Zip: THOMASVILLE, GA 31757

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

I hereby certify that the information supplied with this filing does not qualify for the 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: VIVIEN W. GLASS

SEC

07/17/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date