2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P93000069153

Entity Name: AMALGAMATED GLASS, INC.

Apr 22, 2003 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

1161 SUN CENTURY RD 1092 BUSINESS LANE

SUITE #1 SUITE #1

NAPLES FL 34110 NAPLES, FL 34110

Current Mailing Address: New Mailing Address:

1092 BUSINESS LANE 1161 SUN CENTURY RD SUITE #1 SUITE #1

NAPLES, FL 33963 NAPLES, FL 34110 US

FEI Number: 65-0442413 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

CATALANO, ANTHONY J 4001 TAMIAMI TRAIL NORTH SUITE 404 NAPLES, FL 33940 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

(X) Change () Addition Title: () Delete Title:

STEWMON, TIMOTHY W STEWMON, TIMOTHY W Name: Name: 1161 SUN CENTURY RD SUITE 1 Address: 1092 BUSINESS LANE, SUITE 1 Address:

NAPLES, FL City-St-Zip: City-St-Zip: NAPLES, FL 34110

Title: Title: () Delete (X) Change () Addition

Name: HANSEN, CHRIS V Name: HANSEN, CHRIS V

1161 SUN CENTURY RD SUITE 1 1092 BUSINESS LANE, SUITE 1 Address: Address:

NAPLES, FL 34110 NAPLES, FL City-St-Zip: City-St-Zip:

Title: Title: VTS () Delete VTS (X) Change () Addition HANSEN, KRISTINE Name: HANSEN, KRISTINE Name:

1161 SUN CENTURY RD SUITE 1 1092 BUSINESS LANE, SUITE 1 Address: Address:

City-St-Zip: NAPLES, FL City-St-Zip: NAPLES, FL 34110

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KRISTINE HANSEN **VTS** 04/22/2003