

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000063724

FILED  
Aug 18, 2008  
Secretary of State

Entity Name: FLEET AUTO GLASS SERVICES, INC.

## Current Principal Place of Business:

1402 PROVINCE TOWN CIR  
LUTZ, FL 33549

## New Principal Place of Business:

16213 FANTASIA DR  
TAMPA, FL 33624

## Current Mailing Address:

PO BOX 2266  
LUTZ, FL 33548

## New Mailing Address:

FEI Number: 59-3267869      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FREY, PHILIP J  
1402 PROVINCE TOWN CIR  
LUTZ, FL 33549      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: DP      ( ) Delete  
Name: FREY, PHILIP J  
Address: 1402 PROVINCETOWN CIRCLE  
City-St-Zip: LUTZ, FL 33549

Title: DV      ( ) Delete  
Name: FREY, MARK D  
Address: 16213 FANTASIA DRIVE  
City-St-Zip: TAMPA, FL 33624

Title: DS      ( ) Delete  
Name: FREY, APRIL  
Address: 16213 FANTASIA DRIVE  
City-St-Zip: TAMPA, FL 33624

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: APRIL FREY

DS

08/18/2008

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

\_\_\_\_\_  
Date