

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 29, 2004 08:00 AM
Secretary of State

DOCUMENT # P96000103713

1. Entity Name
GLENN FRIEDLY SALES, INC.



Principal Place of Business
**1135 PASADENA AVENUE SOUTH
SUITE 233
ST. PETERSBURG, FL 33707**

Mailing Address
**1135 PASADENA AVENUE SOUTH
SUITE 233
ST. PETERSBURG, FL 33707**



04132004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3417735	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**FRIEDLY, GLENN C
1135 PASADENA AVENUE SOUTH
SUITE 233
ST PETERSBURG, FL 33707**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	VPD
NAME	FRIEDLY, GLENN C
STREET ADDRESS	1135 PASADENA AVENUE SOUTH SUITE 233
CITY - ST - ZIP	ST. PETERSBURG, FL 33707

TITLE	PD
NAME	PETERSON, MAUREEN B
STREET ADDRESS	1316 PASADENA AVE S.
CITY - ST - ZIP	S. PASADENA, FL 33707

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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NAME	
STREET ADDRESS	
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NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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04/29/04-80158-006 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Glenn C. Friedly* **Glenn C. Friedly Vice President 05/26/04**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #