

PLEASE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000034475 (8)

1. Corporation Name

POTTER'S GLASS & MIRROR, INC.

Principal Place of Business

13224 MT PLEASANT ROAD
JACKSONVILLE FL 32225

Mailing Address

13224 MT PLEASANT ROAD
JACKSONVILLE FL 32225

FILED
May 05 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/16/1997

4. FEI Number

59-3439417

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 1208 NORTH 9th St.

Suite, Apt. #, etc.

2a. Mailing Address

26 Same 1208 N. 9th St.

Suite, Apt. #, etc.

City & State

23 JACKSONVILLE, BEACH, FLA.

Zip

24 32250

Country

25 U.S. AMER

City & State

27 JACKSONVILLE, BEACH, FLA.

Zip

28 32250

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

POTTER, WILLIAM A
13224 MT PLEASANT ROAD
JACKSONVILLE FL 32225

10. Name and Address of New Registered Agent

81 Name

William A. Potter

82 Street Address (P.O. Box Number is Not Acceptable)

1208 NORTH 9th STREET

83

84

CITY JACKSONVILLE BEACH, FL

85

Zip Code 32250

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

William A. Potter

William A. Potter

4-25-98

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME STD
STREET ADDRESS POTTER, ROBERT A
CITY-ST-ZIP 11427 WILLET COURT
JACKSONVILLE FL 32225

TITLE ☐ DELETE

NAME PDD
STREET ADDRESS POTTER, WILLIAM A
CITY-ST-ZIP 13224 MT PLEASANT RD
JACKSONVILLE FL 32225

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

William A. Potter

William A. Potter 4-25-98 904-247-4227

CR2E034 (10/97)