

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000056690

1. Entity Name  
M&M GLASS & MIRROR, INC.



Principal Place of Business

790 29TH ST. SW  
NAPLES, FL 34117

Mailing Address

790 29TH ST. SW  
NAPLES, FL 34117

**FILED**  
**Jul 10, 2008 08:00 AM**  
**Secretary of State**



07072008 No Chg-P CR2E034 (11/05)

4. FEI Number  
59-3584202

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

GRIFFIN, THOMAS  
790 29TH ST. SW  
NAPLES, FL 34117

**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 \$550.00  
Due by September 12, 2008**

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

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	GRIFFIN, THOMAS
STREET ADDRESS	790 29TH ST. SW
CITY- ST- ZIP	NAPLES, FL 34117
TITLE	VP
NAME	KERSEY, MICHAEL
STREET ADDRESS	790 29TH ST. SW
CITY- ST- ZIP	NAPLES, FL 34117
TITLE	S
NAME	THOMPSON, MAXINE
STREET ADDRESS	790 29TH ST. SW
CITY- ST- ZIP	NAPLES, FL 34117
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

000000953902  
07/10/08-80002-020 550.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: M. L. Griffin  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-7-08