

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V49203

Entity Name: AUTO GLASS OF AMERICA, INC.

FILED  
May 01, 2009  
Secretary of State

## Current Principal Place of Business:

416 COMMERCE WAY  
SUITE 100  
LONGWOOD, FL 32750 US

## New Principal Place of Business:

## Current Mailing Address:

416 COMMERCE WAY  
SUITE 100  
LONGWOOD, FL 32750 US

## New Mailing Address:

FEI Number: 59-3132491

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BOVA, MABEL  
4155 S ATLANTIC AVE #316  
NEW SMYRNA BEACH, FL 32169 US

## Name and Address of New Registered Agent:

BOVA, MICHAEL  
416 COMMERCE WAY  
SUITE 100  
LONGWOOD, FL 32750 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: MICHAEL BOVA

05/01/2009

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: P ( ) Delete  
Name: BOVA, MICHAEL  
Address: 4155 S ATLANTIC AVE, #316  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: V ( ) Delete  
Name: BOVA, MABEL  
Address: 4155 S ATLANTIC AVE, #316  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: BOVA, MICHAEL  
Address: 416 COMMERCE WAY SUITE 100  
City-St-Zip: LONGWOOD, FL 32750

Title: V (X) Change ( ) Addition  
Name: BOVA, MABEL  
Address: 416 COMMERCE WAY SUITE 100  
City-St-Zip: LONGWOOD, FL 32750

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: MICHAEL BOVA

PRES

05/01/2009

Electronic Signature of Signing Officer or Director

Date