

**2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000011544

**FILED  
Jan 03, 2011  
Secretary of State**

**Entity Name:** THE GLIDE ADVENTURE, LLC

**Current Principal Place of Business:**

7304 N SAINT VINCENT ST  
TAMPA, FL 33614 US

**New Principal Place of Business:**

**Current Mailing Address:**

7304 N SAINT VINCENT ST  
TAMPA, FL 33614 US

**New Mailing Address:**

FEI Number: 26-4202542      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

VARN, JEAN E  
7304 ST. VINCENT STREET  
TAMPA, FL 33614 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: VARN, JEAN  
Address: 7304 N SAINT VINCENT ST  
City-St-Zip: TAMPA, FL 33614 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JEAN E VARN      MGRM      01/03/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date