

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 12, 2007 08:00 A
Secretary of State

DOCUMENT # L05000106692

1. Entity Name
GLENNWOOD PROPERTY SERVICES, LLC



Principal Place of Business Mailing Address

8413 LAUREL FAIR CIRCLE SUITE 101 **8413 LAUREL FAIR CIRCLE SUITE 101**
TAMPA, FL 33610 **TAMPA, FL 33610**

DO NOT WRITE IN THIS SPACE



01312007No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-3727434	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HAUGHEY, R.J. II, ESQ
100 S. ASHLEY DRIVE, SUITE 2150
TAMPA, FL 33602

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$50.00
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PEARSON, GLENN 8413 LAUREL FAIR CIRCLE SUITE 101 TAMPA, FL 33610
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST PEARSON, GLENN 8413 LAUREL FAIR CIRCLE SUITE 101 TAMPA, FL 33610
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000632475
 02/21/07-80025-010 55.00

DO NOT WRITE IN THIS SPACE

11. 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 is true and accurate and that my 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:  **2/18/07** **813-493-9334**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #