

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000123117

**Entity Name:** GLASSE BEACON LLC

**Current Principal Place of Business:**

18645 SW 293RD TERRACE  
HOMESTEAD, FL 33030

**Current Mailing Address:**

18645 SW 293RD TERRACE  
HOMESTEAD, FL 33030 US

**FEI Number:** 20-8121274

**Certificate of Status Desired:** No

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

GLASSE, MARY  
18645 SW 293RD TERRACE  
HOMESTEAD, FL 33030 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title            PRESIDENT  
Name            GLASSE, GARY R  
Address        18645 SW 293RD TERRACE  
City-State-Zip: MIAMI FL 33032

Title            DIRECTOR  
Name            GLASSE, GARY MARGARET  
Address        18645 SW 293RD TERRACE  
City-State-Zip: MIAMI FL 33032

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** GARY GLASSE

**PRESIDENT**

**04/12/2022**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date