

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000135728

**Entity Name:** 1035 SPYGLASS LANE LLC**Current Principal Place of Business:**253 WEATHERHILL DRIVE  
WEST CHESTER, PA 19382**Current Mailing Address:**253 WEATHERHILL DRIVE  
WEST CHESTER, PA 19382**FEI Number:** 46-1297017**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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           | MGR                     |
| Name            | CARRATO, ROBERT R       |
| Address         | 38 THORNBIRD WAY        |
| City-State-Zip: | NEWTOWN SQUARE PA 19073 |

|                 |                     |
|-----------------|---------------------|
| Title           | MGR                 |
| Name            | ZEBROWITZ, JOSEPH   |
| Address         | 1035 SUGARTOWN ROAD |
| City-State-Zip: | BERWYN PA 19312     |

|                 |                       |
|-----------------|-----------------------|
| Title           | MGR                   |
| Name            | WILLIAMS, TROY        |
| Address         | 231 WEATHERHILL DRIVE |
| City-State-Zip: | WEST CHESTER PA 19382 |

|                 |                       |
|-----------------|-----------------------|
| Title           | MGR                   |
| Name            | MUNAWAR, FURRU KH     |
| Address         | 253 WEATHERHILL DRIVE |
| City-State-Zip: | WEST CHESTER PA 19382 |

|                 |                    |
|-----------------|--------------------|
| Title           | MGR                |
| Name            | MULLEN, MICHAEL    |
| Address         | 836 PARADISE DRIVE |
| City-State-Zip: | AMBLER PA 19002    |

*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:** FURRU KH MUNAWAR**MANAGER/PARTNER****01/09/2014**\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date