

2013 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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: FURRU KH MUNAWAR**MANAGER****02/20/2013**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date