

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000035955

**Entity Name:** GLIDEPATHFLY-INHOMES, LLC

**Current Principal Place of Business:**

695 MAGDA LANE  
OAK HILL, FL 32759

**Current Mailing Address:**

PO BOX 785  
OAK HILL, FL 32759 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

LUGO, ELA M  
695 MAGDA LANE  
PO BOX 785  
OAK HILL, FL 32759 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 P, S, T  
Name ARMAN, MICHAEL P  
Address 695 MAGDA LANE  
PO BOX 785  
City-State-Zip: OAK HILL FL 32759

*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:** MICHAEL P ARMAN

P,S,T

04/20/2018

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

\_\_\_\_\_  
Date