2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Feb 01, 2005 08:00 AM **DOCUMENT # G64415 Secretary of State** 1. Entity Name GLG, INC. Principal Place of Business Mailing Address 229 ROYAL TERN ROAD NO 229 ROYAL TERN ROAD NO PONTE VEDRA BEACH, FL 32082-6205 US PONTE VEDRA BEACH, FL 32082-6205 US No Chg-P 01292005 CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2323661 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LANDWIRTH, HENRY DO NOT WRITE 229 ROYAL TERN ROAD, NORTH PONTE VEDRA BEACH, FL 32082-6205 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. Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE Registered Agent algrature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. \Box Added to Fees OFFICERS AND DIRECTORS 10. n TITLE LANDWIRTH, HENRI NAME STREET ADDRESS 229 ROYAL TERN ROAD, NORTH U00000208225 02/01/05-80078-004 150.00 PONTE VEDRA BEACH, FL 32082 CITY-ST-ZIP SD TILE USSERY, LISA L NAME STREET ADDRESS 346 PABLO TERRACE CITY-ST-ZIP PONTE VEDRA BEACH, FL 32082 3/D mle LANDWIRTH, GARY NAME 2008 IVANHOE RD STREET ADDRESS DO NOT WRITE CITY-ST-ZIP ORLANDO, FL 32804 IN THIS SPACE TITLE LANDWIRTH, GREGORY NAME 15328 WINDING CREEK DRIVE STREET ADDRESS CITY-ST-ZIP **TAMPA, FL 33613** TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

January 31, 2005

(904) 273-4997

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