

**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Apr 20, 2005  
Secretary of State**

DOCUMENT# L01000007879

Entity Name: WILLGLENN, LLC

**Current Principal Place of Business:**

115 N. GLENWOOD AVE.  
ORLANDO, FL 32803

**New Principal Place of Business:**

**Current Mailing Address:**

115 N. GLENWOOD AVE.  
ORLANDO, FL 32803

**New Mailing Address:**

FEI Number: 75-3057736

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GLENN, WILLIAM L JR.  
115 N. GLENWOOD AVE.  
ORLANDO, FL 32803 US

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

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

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: GLENN, WILL  
Address: 115 GLENWOOD AVE W  
City-St-Zip: ORLANDO, FL 32803

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE: WILLIAM L. GLENN JR

MGRM

04/20/2005

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date