2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000019791

Entity Name: GLASSTONE, L.L.C.

FILED Mar 31, 2009 Secretary of State

Current Principal Place of Business:

1555 PALM BEACH LAKES BLVD., SUITE 1100
STE 1100
WEST PALM BEACH, FL 33401

New Principal Place of Business:

1555 PALM BEACH LAKES BLVD
STE 1100
WEST PALM BEACH, FL 33401

Current Mailing Address: New Mailing Address:

C/O FLORIDA MANAGEMENT COMPANY P.O. BOX 3267 WEST PALM BEACH, FL 33402

WEST PALM BEACH, FL 33401

City-St-Zip:

FEI Number: 80-0024669 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ECCLESTONE, E. LLWYD JR.

1555 PALM BEACH LAKES BLVD., SUITE 1100
WEST PALM BEACH, FL 33401 US

ECCLESTONE, E. LLWYD JR.

1555 PALM BEACH LAKES BLVD.
STE 1100
WEST PALM BEACH, FL 33401 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.

City-St-Zip:

SIGNATURE: 03/31/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

Name: GLASSTONE OPERATING COMPANY Name:
Address: 1555 PALM BEACH LAKES BLVD., SUITE 1100 Address:

Title: P () Delete Title: () Change () Addition

 Name:
 ECCLESTONE, E.LLWYD
 Name:

 Address:
 1555 PALM BEACH LAKES BLVD #1100
 Address:

 City-St-Zip:
 WEST PALM BEACH, FL 33401
 City-St-Zip:

Title: VD () Delete Title: V (X) Change () Addition

Name: LEYENDECKER, HELENA Name: LEYENDECKER, HELENA

 Address:
 1555 PALM BEACH LAKES BLVD #1100
 Address:
 1555 PALM BEACH LAKES BLVD #1100

 City-St-Zip:
 WEST PALM BEACH, FL 33401
 City-St-Zip:
 WEST PALM BEACH, FL 33401

Title: ST () Delete Title: () Change () Addition

 Name:
 GAMMON, NANNETTE
 Name:

 Address:
 1555 PALM BEACH LAKES BLVD #1100
 Address:

 City-St-Zip:
 WEST PALM BEACH, FL 33401
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: NANNETTE GAMMON ST 03/31/2009