

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000030672

FILED
Apr 01, 2009
Secretary of State

Entity Name: GLASSMAN PROPERTIES, LLC

Current Principal Place of Business:

1000 SOUTH FEDERAL HIGHWAY
BOYNTON BEACH, FL 33435

New Principal Place of Business:

Current Mailing Address:

1000 SOUTH FEDERAL HIGHWAY
BOYNTON BEACH, FL 33435

New Mailing Address:

FEI Number: 82-0577249

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRECKER, CHARLES D ESQ.
C/O STEARNS NEAVER
200 EAST LAS OLAS BOULEVARD STE 2100
FORT LAUDERDALE, FL 33301 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/MANAGERS:

Title: MGRM () Delete
Name: GLASSMAN REALTY, LTD.
Address: 1000 SO. FEDERAL HIGHWAY
City-St-Zip: BOYNTON BEACH, FL 33435

Title: MGR () Delete
Name: GLASSMAN, LARRY D
Address: 7043 AYRSHIRE LANE
City-St-Zip: BOCA RATON, FL 33496

Title: MGR () Delete
Name: GLASSMAN, STEVEN M
Address: 3862 SOUTH LAKE DRIVE
City-St-Zip: BOYNTON BEACH, FL 33435

ADDITIONS/CHANGES:

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

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

Title: () Change () Addition
Name:
Address:
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: LARRY D. GLASSMAN

MGR

04/01/2009

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