

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Jan 26, 2005 08:00 AM
Secretary of State**

DOCUMENT # L03000008125

1. Entity Name
GLN REALTY, LLC



Principal Place of Business
**1295 SW 4TH AVENUE
DELRAY BEACH, FL 33444**

Mailing Address
**1295 SW 4TH AVENUE
DELRAY BEACH, FL 33444**



01142005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
86-1096729

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BLAKEMAN, RICHARD R
1900 NW CORPORATE BOULEVARD
SUITE 400E
BOCA RATON, FL 33431**

**DO NOT WRITE
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.

(NOTE: Registered Agent signature required when re-registering)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2005**

000000197072
01/26/05-00000-015 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	GUEDJ, MAX
STREET ADDRESS	5713 VIA DELA PLATA CIRCLE
CITY- ST- ZIP	BOCA RATON, FL 33434

TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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NAME	
STREET ADDRESS	
CITY- ST- ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/24/05 **561-278-8288**
Date Daytime Phone #