


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jun 01, 2007 8:00 am
Secretary of State

06-01-2007 90095 022 ****55.00

DOCUMENT # L03000039744		
1. Entity Name GLOBAL GROUNDED, LLC		
Principal Place of Business 2340 N.W. 29TH STREET FORT LAUDERDALE, FL 33311	Mailing Address 2340 N.W. 29TH STREET FORT LAUDERDALE, FL 33311	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent GRISHAM, CLARENCE J 2340 N.W. 29TH STREET FORT LAUDERDALE, FL 33311		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
Filing Fee is \$50.00 Due by May 1, 2007		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GRISHAM, CLARENCE 2340 NW 29TH ST FORT LAUDERDALE, FL 33311	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GRISHAM, HAZEL 2340 NW 29TH ST FORT LAUDERDALE, FL 33311	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u>Clarence Grisham</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		Date <u>5/20-07</u> <small>Daytime Phone #</small>

03162007No Chg-LLC

CR2E083 (11/05)

4. FEI Number

77-0611636

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required