

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000020988

Entity Name: B. GLANCE ENTERPRISES LLC

FILED
Apr 22, 2009
Secretary of State

Current Principal Place of Business:

8608 46TH AVENUE CIRCLE WEST
BRADENTON, FL 34210

New Principal Place of Business:

4243 OVERTURE CIRCLE
BRADENTON, FL 34209

Current Mailing Address:

8608 46TH AVENUE CIRCLE WEST
BRADENTON, FL 34210

New Mailing Address:

4243 OVERTURE CIRCLE
BRADENTON, FL 34209

FEI Number: 30-0253428

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLANCE, BRAD
8608 46TH AVENUE CIRCLE WEST
BRADENTON, FL 34210 US

Name and Address of New Registered Agent:

GLANCE, BRAD
4243 OVERTURE CIRCLE
BRADENTON, FL 34209 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.

SIGNATURE:

04/22/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GLANCE, BRAD
Address: 8608 46TH AVENUE CIRCLE WEST
City-St-Zip: BRADENTON, FL 34210

Title: MGR (X) Delete
Name: R.E.A.L., LLC
Address: 2414 AVENUE A
City-St-Zip: BRADENTON BEACH, FL 34217

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GLANCE, BRAD
Address: 4243 OVERTURE CIRCLE
City-St-Zip: BRADENTON, FL 34209

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: BRAD GLANCE

MGRM

04/22/2009

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