

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000060882

FILED
Jul 06, 2007
Secretary of State

Entity Name: GLENWOOD RESERVE HOMES, LLC

Current Principal Place of Business:

120 EAST RICH AVENUE
DELAND, FL 32724

New Principal Place of Business:

3405 TIMBERLINE DRIVE
DELAND, FL 32720

Current Mailing Address:

120 EAST RICH AVENUE
DELAND, FL 32724

New Mailing Address:

3405 TIMBERLINE DRIVE
DELAND, FL 32720

FEI Number: 20-3065754 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

PAUL, HARLAN L
142 EAST NEW YORK AVENUE
DELAND, FL 32724 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: MGR () Delete
Name: MAROTTE, WILLIAM F
Address: 120 EAST RICH AVENUE
City-St-Zip: DELAND, FL 32724

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MAROTTE, WILLIAM F
Address: 3405 TIMBERLINE DRIVE
City-St-Zip: DELAND, FL 32720

Title: MGR () Change (X) Addition
Name: SHUMAN, JACK B
Address: 6119 LAKE WINONA RD.
City-St-Zip: DELEON SPRINGS, FL 32130

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: JACK B. SHUMAN

MGR

07/06/2007

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