

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000093505

Entity Name: 1720 GLENCOE LLC

FILED
Jan 14, 2009
Secretary of State

Current Principal Place of Business:

1720 GLENCOE RD
WINTER PARK, FL 32789

New Principal Place of Business:

807 WEST MORSE BLVD, SUITE 101
WINTER PARK, FL 32789

Current Mailing Address:

807 W MORSE BLVD
SUITE 101
WINTER PARK, FL 32789

New Mailing Address:

807 WEST MORSE BLVD, SUITE 101
WINTER PARK, FL 32789

FEI Number: 20-3514971

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, THOMAS S
650 OSCEOLA AVE
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

MILLER, THOMAS S
807 WEST MORSE BLVD, SUITE 101
WINTER PARK, FL 32789 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:

01/14/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MR. () Delete
Name: MILLER, THOMAS S
Address: 650 OSCEOLA AVE
City-St-Zip: WINTER PARK, FL 32789

Title: MS (X) Delete
Name: ZAHN, JESSICA L
Address: 807 WEST MORSE BLVD SUITE 101
City-St-Zip: WINTER PARK, FL 32789 US

ADDITIONS/CHANGES:

Title: MR. (X) Change () Addition
Name: MILLER, THOMAS S
Address: 807 WEST MORSE BLVD, SUITE 101
City-St-Zip: WINTER PARK, FL 32789

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: MHAMILTON

FMGR

01/14/2009

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