

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Feb 10, 2008  
Secretary of State**

DOCUMENT# L05000105326

Entity Name: 33 GLYNN COVE, L.L.C.

**Current Principal Place of Business:**

1960 HIGH VISTA DRIVE  
LAKELAND, FL 33813

**New Principal Place of Business:**

**Current Mailing Address:**

1960 HIGH VISTA DRIVE  
LAKELAND, FL 33813

**New Mailing Address:**

FEI Number: 20-3890350      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CLEMENTS, MARTHA LYNN H  
1960 HIGH VISTA DRIVE  
LAKELAND, FL 33813      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: MGRM ( ) Delete  
Name: CLEMENTS, MARTHA LYNN H  
Address: 1960 HIGH VISTA DRIVE  
City-St-Zip: LAKELAND, FL 33813

Title: MGRM ( ) Delete  
Name: CLEMENTS, GARY D  
Address: 1960 HIGH VISTA DRIVE  
City-St-Zip: LAKELAND, FL 33813

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MARTHA LYNN H. CLEMENTS

MGMR

02/10/2008

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