

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000059531

Entity Name: GLENVILLE FIVE, LLC

FILED  
Apr 24, 2008  
Secretary of State

## Current Principal Place of Business:

833 COUNTY CLUB DRIVE  
HIGHLANDS, NC 28741

## New Principal Place of Business:

## Current Mailing Address:

833 COUNTY CLUB DRIVE  
HIGHLANDS, NC 28741

## New Mailing Address:

FEI Number: 20-5037412

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHOUPPE, BYRON C JR.  
6500 SUNSET WAY #415  
ST. PETERSBURG BEACH, FL 33706 US

## Name and Address of New Registered Agent:

SHOUPPE, BYRON C JR.  
400 BEACH DR NE APT 902  
ST. PETERSBURG, FL 33701 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:

04/24/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: BOND, WILLIAM JR MGR  
Address: 833 COUNTRY CLUB DRIVE  
City-St-Zip: HIGHLANDS, NC 28741 US

Title: MGR ( ) Delete  
Name: EVANS, JIMMY E MGR  
Address: 833 COUNTRY CLUB DRIVE  
City-St-Zip: HIGHLANDS, NC 28741 US

Title: MGR ( ) Delete  
Name: GINN, SHANNON R MGR  
Address: 833 COUNTRY CLUB DRIVE  
City-St-Zip: HIGHLANDS, NC 28741 US

Title: MGR ( ) Delete  
Name: LARGAY, CHARLIE E MGR  
Address: 833 COUNTRY CLUB DRIVE  
City-St-Zip: HIGHLANDS, NC 28741 US

Title: MGR ( ) Delete  
Name: MAHAFFEY, MARK T MGR  
Address: 833 COUNTRY CLUB DRIVE  
City-St-Zip: HIGHLANDS, NC 28741 US

Title: MGR ( ) Delete  
Name: SHOUPPE, BYRON JR C MGR  
Address: 833 COUNTRY CLUB DRIVE  
City-St-Zip: HIGHLANDS, NC 28741 US

## ADDITIONS/CHANGES:

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

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

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

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

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: BYRON C SHOUPPE JR

MGR

04/24/2008

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