

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000051364

Entity Name: CT GLEE, LLC

FILED  
Apr 05, 2011  
Secretary of State

**Current Principal Place of Business:**

2732 MUIRFIELD DRIVE  
NAVARRE, FL 32566 US

**New Principal Place of Business:**

**Current Mailing Address:**

2732 MUIRFIELD DRIVE  
NAVARRE, FL 32566 US

**New Mailing Address:**

FEI Number: 39-2056565

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCHAIBLE, LORA LEE  
2732 MUIRFIELD DRIVE  
NAVARRE, FL 32566 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  
Name: SCHAIBLE, GLENN D  
Address: 2732 MUIRFIELD DRIVE  
City-St-Zip: NAVARRE, FL 32566 US

Title: MGRM  
Name: SCHAIBLE, LORA LEE  
Address: 2732 MUIRFIELD DRIVE  
City-St-Zip: NAVARRE, FL 32566 US

Title: MGR  
Name: SCHAIBLE, TODD D  
Address: 1717 WINDPOINTE COVE  
City-St-Zip: GULF BREEZE, FL 32563 US

Title: MGR  
Name: SCHAIBLE, CHRISTOPHER A  
Address: 1014 AIRPORT RD 164  
City-St-Zip: DESTIN, FL 32541

I hereby 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: LORA LEE SCHAIBLE

MGRM

04/05/2011

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