

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000110142

Entity Name: GLORY PROPERTIES, LLC

FILED
Apr 16, 2009
Secretary of State

Current Principal Place of Business:

126 W. ADAMS STREET
JACKSONVILLE, FL 32202

New Principal Place of Business:

4745 SUTTON PARK COURT
BUILDING 500, SUITE 502
JACKSONVILLE, FL 32224

Current Mailing Address:

126 W. ADAMS STREET
JACKSONVILLE, FL 32202

New Mailing Address:

4745 SUTTON PARK COURT
BUILDING 500, SUITE 502
JACKSONVILLE, FL 32224

FEI Number: 20-5583211

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAYLOR, SEAN K
126 W. ADAMS STREET
JACKSONVILLE, FL 32202 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: TAYLOR, SEAN K
Address: 126 W. ADAMS STREET
City-St-Zip: JACKSONVILLE, FL 32202

Title: MGRM () Delete
Name: GARDNER, WILLIAM E
Address: 7952 VINEYARD LAKE ROAD NORTH
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TAYLOR, SEAN K
Address: 4745 SUTTON PARK COURT, BLDG 500, SUITE 50
City-St-Zip: JACKSONVILLE, FL 32224

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: SEAN K TAYLOR

MGR

04/16/2009

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