

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000051872

FILED
Apr 25, 2012
Secretary of State

Entity Name: FUT GLOVE, LLC

Current Principal Place of Business:

110 CUMBERLAND PARK DRIVE
SUITE 302
ST. AUGUSTINE, FL 32095

New Principal Place of Business:

Current Mailing Address:

110 CUMBERLAND PARK DRIVE
SUITE 302
ST. AUGUSTINE, FL 32095

New Mailing Address:

FEI Number: 30-0628322 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, DANIEL
110 CUMBERLAND PARK DRIVE
SUITE 302
ST. AUGUSTINE, FL 32095 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: CHROMY, TIMOTHY C
Address: 1895 MOORINGS CIRCLE
City-St-Zip: MIDDLEBURG, FL 32068 UN

Title: MGRM
Name: JOHNSON, DANIEL E
Address: 588 SAINT CLAUDE PLACE
City-St-Zip: SAINT JOHNS, FL 32259 UN

Title: MGRM
Name: VANBENNEKOM, JASON L
Address: 210 ST. JOHNS FOREST BLVD.
City-St-Zip: SAINT JOHNS, FL 32259 UN

Title: MGRM
Name: CONE, MARTIN A
Address: 287 SAINT JOHNS FOREST BLVD.
City-St-Zip: SAINT JOHNS, FL 32259

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: MARTIN A. CONE

MGRM

04/25/2012

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