

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000001449

Entity Name: GLENSHORE, L.L.C.

FILED  
Apr 16, 2009  
Secretary of State

## Current Principal Place of Business:

3720 S DIXIE HWY  
WEST PALM BEACH, FL 33405

## New Principal Place of Business:

## Current Mailing Address:

222 LAKEVIEW AVENUE  
PENTHOUSE #5  
WEST PALM BEACH, FL 33401

## New Mailing Address:

FEI Number: 65-0857665

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KOEPPPEL, JOEL P ESQ  
222 LAKEVIEW AVE  
PH 5  
WEST PALM BEACH, FL 33401 US

## Name and Address of New Registered Agent:

MORRISON, CARLOS  
222 LAKEVIEW AVE  
PH 5  
WEST PALM BEACH, FL 33401 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: CARLOS MORRISON

04/16/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: MORRISON, CARLOS  
Address: 222 LAKEVIEW AVENUE, PENTHOUSE #5  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: VP ( ) Delete  
Name: MORRISON, THOMAS  
Address: 222 LAKEVIEW AVE PH 5  
City-St-Zip: WEST PALM BEACH, FL 33401

## ADDITIONS/CHANGES:

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

Title: MGR (X) Change ( ) Addition  
Name: MORRISON, THOMAS  
Address: 222 LAKEVIEW AVE PH 5  
City-St-Zip: WEST PALM BEACH, FL 33401

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: CARLOS MORRISON

MGR

04/16/2009

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