## 2008 LIMITED LIABILITY COMPANY

## ANNUAL REPORT

**FILED** Feb 25, 2008 08:00 AN Secretary of State

DOCUMENT # L99000007747
1. Entity Name
GLASS PROPERTIES, L.L.C.
•



Principal Place of Business

Mailing Address

**3010 WATSON DRIVE** MARIANNA, FL 32446 P.O. BOX 275 MARIANNA, FL 32447



1 1 1 1 1 1 1 1	an abit sign everyon be	come of particularity	West to be the west	<ul> <li>Propus usina raking</li> </ul>	Committee to the second
, ;,.,	ode includes in the institute of	TO DIM WOLDS TO THE OF	The same and the training of the		
Carried Section	ောက္လည္းနဲ့ အေန		Marie Marie de Carlos		Walter States and Company of the
ris rationale (Augustin	A				
1. C. 1. S. C. 1	H) NO	) I WK	N	THIS S	PAKE
	in green days earlies		Burger Butter of the	distribution of the control of	. 1. 11178 1
ing against a say	The second second	and affirm the property of a	Andre Aren Service		na emerikan kata

terderinan gengana persebuah ang ang kilonom pada seberah ang pengangan ang berapisah kadalah di berapisah 

> 02132008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 59-3614193

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GLASS, JERRY A 3010 WATSON DRIVE MARIANNA, FL 32446

## DO NOT WRITE IN THIS SPACE

	The above named entity submits this statement for the purpose of chan the obligations of registered agent.	ging its registered office or registered agent, or bot	h, in the State of Florida. I am familiar with, and accept
SIC	SNATURE	•	
-	Signature, typed or printed name of registered agent and title if applicable,	(NOTE: Registered Agent signature required when reinstating)	DATE

er kusiki ya parileb

## FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GLASS, JERRY A 3010 WATSON DRIVE MARIANNA, FL 32446 MGRM
NAME STREET ADDRESS CITY-ST-ZIP	BAKER, LYNN W
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000835563 02/29/08-80035-017-138.75 

Control of the second s and the second of the second s 等一种原则的复数形式的复数形式 经收益

DO NOT WRITE IN THIS SPACE

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 reporter or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE AND TYPED OF

The Control of the State of the