## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # M03000002415**

1. Entity Name GLIMCHER WESTSHORE, LLC



FILED Apr 24, 2007 08:00 AM Secretary of State

Principal Place of Business

150 EAST GAY STREET COLUMBUS, OH 43215

Mailing Address

150 EAST GAY STREET COLUMBUS, OH 43215



04132007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0107126

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

## DO NOT WRITE IN THIS SPACE

		IN	THIS SPACE
	e named entity submits this statement for the purpose of changing tions of registered agent.	ng its registered office or registered agent, or b	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and little if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
F D	lling Fee is \$50.00 ue by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GLIMCHER PROPERTIES LIMITED PARTNERSHIP 150 EAST GAY STREET COLUMBUS, OH 43215		U00000700447
TITLE NAME STREET ADDRESS CITY-ST-ZIP			000000728447 05/07/07-80018-008 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE			

11. 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

NAME STREET ADDRESS CITY-ST-ZIP

614-621-9000

4-18-07

Date