2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 03, 2008 8:00 am
Secretary of State
02-28-2008 90101 001 ***138.75

DOCUMENT # M98000000677

1. Entity Name
GLW PROPERTIES NORTH, L.L.C.

Principal Place of Business	Mailing Address
3700 STATE STREET SUITE 200 SANTA BARBARA, CA 93105	3700 STATE STREET SUITE 200 SANTA BARBARA, CA 93105

DO NOT WRITE IN THIS SPACE

01112008No Chg-LLC CR2E083 (12/07)

4. FEI Number
65-0846333
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WARREN, AVIS E JR
125 WORTH AVE STE 203
AVIS & AVIS PA
PALM BEACH, FL 33480

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	GLW MEMBER, INC.
STREET ADDRESS	125 WORTH AVE STE 203
CITY-ST-ZIP	PALM BEACH, FL 33480
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _____ 5/7/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #