

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000050273

Entity Name: GLC MANAGEMENT INC.

FILED  
Jan 20, 2009  
Secretary of State

## Current Principal Place of Business:

3444 EASTLAKE ROAD  
STE 416  
PALM HARBOR, FL 34685 US

## New Principal Place of Business:

## Current Mailing Address:

3444 EASTLAKE ROAD  
STE 416  
PALM HARBOR, FL 34685 US

## New Mailing Address:

FEI Number: 04-3682192

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHANE, GLENN  
3444 EAST LAKE ROAD  
416  
PALM HARBOR, FL 34685 US

## Name and Address of New Registered Agent:

SHANE, GLENN B  
3444 EAST LAKE ROAD  
416  
PALM HARBOR, FL 34685 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: GLENN B. SHANE

01/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SHANE, GLENN B  
Address: 3444 EAST LAKE ROAD STE 416  
City-St-Zip: PALM HARBOR, FL 34685 US

Title: D ( ) Delete  
Name: SHANE, LARA G  
Address: 3444 EAST LAKE ROAD SUITE 416  
City-St-Zip: PALM HARBOR, FL 34685

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: SHANE, LARA G  
Address: 3444 EAST LAKE ROAD SUITE 416  
City-St-Zip: PALM HARBOR, FL 34685 US

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GLENN B. SHANE

PRES

01/20/2009

Electronic Signature of Signing Officer or Director

Date