

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

00 MAY -1 AM 10:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M98000000584

1. Entity Name

THE MEDALLION ADVISORY SERVICES, LLC

Principal Place of Business

811 RITCHIE HIGHWAY, SUITE 25
SEVERNA PARK MD 21146

Mailing Address

811 RITCHIE HIGHWAY, SUITE 25
SEVERNA PARK MD 21146-4130



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

52-1995265

Applied For

Not Applicable

5. Certificate of Status Desired

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

PENROSE, KENNETH R
271 53RD CIRCLE
VERO BEACH FL 32968

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

500003258485--1
-05/19/00--01006--002
*****50.00 *****50.00

9. MANAGING MEMBERS/MEMBERS

TITLE MGRM Delete
NAME COCHRAN, STEPHANIE A
STREET ADDRESS 811 RITCHIE HIGHWAY, SUITE 25
CITY-ST-ZIP SEVERNA PARK MD 21146

TITLE MGRM Delete
NAME WILSON, RONALD
STREET ADDRESS 815 RITCHIE HIGHWAY, SUITE 1015
CITY-ST-ZIP SEVERNA PARK MD

TITLE MGRM Delete
NAME THUSIUS, ROGER
STREET ADDRESS 815 RITCHIE HIGHWAY, SUITE 15
CITY-ST-ZIP SEVERNA PARK MD

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS 819 Ritchie Hwy Suite 1015
CITY-ST-ZIP Severna Park, MD 21146

TITLE Change Addition
NAME
STREET ADDRESS 811 Ritchie Hwy Suite 15
CITY-ST-ZIP Severna Park, MD 21146

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

4-19-00

Date

4105448400

Daytime Phone #

CR2E083 (9/99)