

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000051277

**Entity Name:** GMP FORREST, LLC

**Current Principal Place of Business:**

507 FORREST STREET  
SANTA ROSA BEACH, FL 32459

**Current Mailing Address:**

1000 RIDGEWAY LOOP ROAD  
SUITE 200  
MEMPHIS, TN 38120 US

**FEI Number:** 90-0820933

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WEATHERSBY, NANCY B  
507 FORREST STREET  
SANTA ROSA BEACH, FL 32459 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:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name WEATHERSBY, EUGENE WSR.  
Address 1000 RIDGEWAY LOOP ROAD, SUITE 200  
City-State-Zip: MEMPHIS TN 38120

Title MGR  
Name WEATHERSBY, EUGENE WJR.  
Address 128 TAGGART AVENUE  
City-State-Zip: NASHVILLE TN 37205

Title MGR  
Name WEATHERSBY, NANCY B  
Address 509 FORREST STREET  
City-State-Zip: SANTA ROSA BEACH FL 32459

Title MGR  
Name STEFFENS, NANCY W  
Address 4277 GRANDVIEW AVENUE  
City-State-Zip: MEMPHIS TN 38117

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** WEATHERSBY, EUGENE W. SR.

**MANAGER**

**01/14/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date