#### 2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000003259

**Entity Name: CAPITALSOURCE FINANCE LLC** 

### **Current Principal Place of Business:**

5404 WISCONSIN AVENUE 2ND FLOOR CHEVY CHASE, MD 20815

## **Current Mailing Address:**

5404 WISCONSIN AVENUE 2ND FLOOR CHEVY CHASE, MD 20815 US

FEI Number: 26-0563180 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

**FILED** Apr 30, 2014

**Secretary of State** 

CC5256666475

# Authorized Person(s) Detail:

Title MANAGER Title SECRETARY CAPITALSOURCE TRS LLC Name Name OGROSKY, KORI

5404 WISCONSIN AVENUE Address Address 5404 WISCONSIN AVENUE CHEVY CHASE MD 20815 City-State-Zip: CHEVY CHASE MD 20815 City-State-Zip:

Title **PRESIDENT** 

PIECZYNSKI, JAMES Name

Address 30699 RUSSELL RANCH ROAD City-State-Zip: WESTLAKE VILLAGE CA 91362

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: CAPITALSOURCE TRS LLC

**MANAGER** 

04/30/2014