

FILED
Feb 27, 2003 8:00 am
Secretary of State

02-06-2003 90026 002 ****55.00

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**2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L02000003552

1. Entity Name

GREENTRUST - MADERA, LC



Principal Place of Business

**3909 NEWBERRY ROAD, SUITE A
GAINESVILLE FL 32607**

Mailing Address

**3909 NEWBERRY ROAD, SUITE A
GAINESVILLE FL 32607**

2. Principal Place of Business

3. Mailing Address

13743 LAKESIDE DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

CLARKSVILLE, MD

Zip

Country

Zip

Country

21029

USA

4. FEI Number

01-0597140

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$5.00 Additional
Fee Required**

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**CHAMBERLAIN, STEVEN M
618 NE 1ST STREET
GAINESVILLE FL 32601**

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

SIGNATURE

STEVEN M. CHAMBERLAIN

1/27/03

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 Florida Department of State
Due By May 1, 2003**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MANAGING MEMBER
GREENTRUST, LLC
3909 NEWBERRY ROAD SUITE A
GAINESVILLE FL 32607**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MANAGING MEMBER
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10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP
☐ Change ☐ Addition

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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: **X [Signature]**

**GREENTRUST, LLC, MANAGING MEMBER, BY
WENDY BRATZEL 1/27/03 301-854-9540**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (10/02)