

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 09, 2004 8:00 am
Secretary of State

03-09-2004 90293 023 ****50.00

DOCUMENT # L02000011311

1. Entity Name

MERCHANT PROPERTIES GREENBRIAR, L.L.C.



Principal Place of Business

3362 GREENBRIAR CIR.
GULF BREEZE, FL 32563

Mailing Address

5393 Soundside
3362 GREENBRIAR CIR.
GULF BREEZE, FL 32563
OR



01262004No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
03-0470259

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

MERCHANT, HAROLD M JR
5393 SOUNDSIDE DRIVE
GULF BREEZE, FL 32561

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00
Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
MERCHANT, HAROLD M JR
5393 SOUNDSIDE DR.
GULF BREEZE, FL 32563

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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:

H.M. Merchant Mgr.

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

3-3-04 850 932 0329

Date

Daytime Phone #