

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

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90307 033 ****50.00

DOCUMENT # L02000032943

1. Entity Name

THE MADISON HEDGE GROUP, L.L.C.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1800 Second Street

Suite, Apt. #, etc.

Suite 780

City & State

Sarasota, Florida

Zip

34236

Country

U.S.A.

3. Mailing Address

1800 Second Street

Suite, Apt. #, etc.

Suite 780

City & State

Sarasota, Florida

Zip

34236

Country

U.S.A.

4. FEI Number

55-0818789

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

William T. Kirtley, Esq.

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

1776 Ringling Boulevard

City

Sarasota

FL

Zip Code
34236

**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.

DATE

FEE IS \$50.00

**Make Check Payable to Florida Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS / MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Managing Member
Guy S. Della Penna
1800 Second Street, Suite 780
Sarasota, Florida 34236

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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:

Guy S. Della Penna
Guy S. Della Penna

04/21/03

941/365-4200

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

Date

Daytime Phone #

CR2E083B (12/02)