

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000118813

FILED
Apr 22, 2008
Secretary of State

Entity Name: GREENPORT GROUP, LLC

Current Principal Place of Business:

14540 SW 136 STREET
SUITE 102
MIAMI, FL 33186 US

New Principal Place of Business:

Current Mailing Address:

14540 SW 136 STREET
SUITE 102
MIAMI, FL 33186 US

New Mailing Address:

FEI Number: 26-1473353 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LOPES, ERNESTO
14540 SW 136 STREET
SUITE 102
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: THE GREENWICH DEVELOPMENT GROUP LLC
Address: 14540 SW 136 STREET, SUITE 102
City-St-Zip: MIAMI, FL 33186 US

Title: MGRM () Delete
Name: GREENWICH REAL ESTATE SERVICES, LLC
Address: 14540 SW 136 STREET, SUITE 102
City-St-Zip: MIAMI, FL 33186 US

Title: MGRM () Delete
Name: PORTLAND SERVICES, LLC
Address: 14540 SW 136 STREET, SUITE 102
City-St-Zip: MIAMI, FL 33186 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: THE GREENWICH DEVELOPMENT GROUP LLC MNGR 04/22/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date