2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #	1400000	000504
DOCUMENT #	MAROUUU	いしいつひ4



1. Entity Name											
THE MEDALLION ADVISORY SERVICES, LLC						03 APR 30 PH 3: 58					
						11/3	03 86	R 30 PM	3. 00		
Principal Plac	e of Business		Mailing Address				03 M	ETARY OF S HASSEE, FL	TATE.		
811 RITCHIE HIGHWAY, SUITE 25 811 RITCHIE HIGHWAY, SUITE 2		TE 25		,	SECRE	TAKEF FI	ORIDA	7			
SEVERNA PARI	K MD 21146	\$	SEVERNA PARK MD 21146				TALLA	HAZZEEL			
											ALIEL BERLEBER
2. Principal Place of Business 3. Mailing Address											
						10 00 10 1		######################################	inili dipi indi		
Suite, Apt. #, etc. Suite, Apt. #, etc.]	CHECK HERE I	F MAKIN	IG CHANGES	3		
											
City & State			City & State			4. FEI Number	52-1995265	5		pplied For lot Applicable	
Zip Country		y T	Zip Coun		ntry		5 0 45	Obstant Desired	707	\$5.00 Ad	
						·	5. Certificate of			Fee Require	
	6. Name and Add	ress of Current Reg	istered Agent		Name	-	7. Name and Ac	dress of New Re	gistered	Agent	_
PEN	rose, Kenneth R				Name		-				
	53RD CIRCLE				Street A	ddress (F	P.O. Box Number is	Not Acceptable))		
VER	O BEACH FL 32968				 -						
			•		City				F	L Zip Coo	ie ·
	named entity submits ions of registered ager		e purpose of changing its	registere	ed office or	r registere	ed agent, or both, i	in the State of Flor	rida. I am	familiar with,	and accept
SIGNATURE .			•								
	Signature, typed or printed nar	ne of registered agent and tit	tle if applicable. (NOTE	: Registere	d Agent signat	ure required	when reinstating)		DATE		
			FILE NO	W!!! 1	FEE IS \$	50.00					
	,		Make Check Payabl Due	e to Fle	orida Dej	partmer	nt of State	10176:	144	40	
		· · · · · · · · · · · · · · · · · · ·		By Ma	ay 1, 200	3 	U47.5070	301103	-UZ4	**55.UU	i
9.		NAGING MEMBERS		10.				ADDITIONS/	CHANGE		
TITLE	MGRM	A INIT	🔀 Delete	TITLE		MGR	wers, Lo:	rraine A		K Change	Addition
NAME STREET ADDRESS	FLOWERS, LORR/ 40 YORK ROAD, 3			NAM STRE	ET ADDRESS		York Road			·	
CITY-\$T-ZIP	TOWSON MD 212		,		-ST-ZIP		son MD 2		5250		
TITLE	MGRM		X Delete	TITLE		MGR				☐ Change	X Addition
NAME	MILLARD, CARL A	NDREW		NAM		Mit	chell, Pl	hyllis R		-	
STREET ADDRESS	22C NORTH TRAI				ET ADDRESS	110:	32 Nichol	las Lane	, Su	ite A1	01
CITY-ST-ZIP	TYRON NC 28782	<u> </u>			-ST-ZIP		lin MD 2	<u> 1811 </u>			
TITLE	MGRM	•	Delete	TITLE		MGR				☐ Change	X Addition
NAME STREET ADDRESS	THUSIUS, ROGER 815 RITCHIE HIGH			NAM! STRE	et address	Giu.	liani, Lo	oretta M	_		
CITY-ST-ZIP	SEVERNA PARK N		•		-ST-ZIP	811	Ritchie	Highway	, Su	ite 25	
TITLE	MGRM		X Delete	TITLE		MGR	erna Parl	<u> </u>	46	☐ Change	★ Addition
NAME (REINHART, TERRY	(NAM	E		lor Jr.,	Joseph	7.	_	_
STREET ADDRESS	TREET ADDRESS 10274 LAKE ARBOR WAY, SUITE 208 STREET		ET ADDRESS		Ritchie			ite 25			
CITY-ST-ZIP	MITCHELLVILLE M	ID 20721		-	-ST-ZIP	Seve	erna Park				
TITLE	MGRM	OWADD C	🔀 Delete	TITLE		MGR	tenhaus,	•		X Change	Addition
NAME STREET ADDRESS	GARTENHAUS, HO 9210 CORPORATE			NAMI STRE	E Et address		Corpora			uite 2	40
CITY-ST-ZIP	ROCKVILLE MD 2				-ST-ZIP		ville,MI		., 5	LICE Z	10
TITLE	MGR		⊠ Delete	TITLE		MGR				☐ Change	Addition
NAME	VETTER, FREDERI			NAME			airy, Dou	ıglas R			
STREET ADDRESS	811 RITCHIE HWY			STRE	ET ADDRESS		Old Pado		d		

CITY-ST-ZIP SEVERNA PARK MD 21146

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 system empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SIGNATURE AND TYPED OR PRI

2003 Limited Liability Company
Uniform Business Report (UBR) - CONTINUED - Medallion Advisory Services, LLC

ADD:

MGR Robert Steiner 1104 W. Spresser Street Taylorville, IL 62568