

2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M19000005646

Entity Name: CONTINENTAL 466 FUND LLC

Current Principal Place of Business:

W134N8675 EXECUTIVE PKWY.
MENOMONEE FALLS, WI 53051

Current Mailing Address:

W134N8675 EXECUTIVE PKWY.
MENOMONEE FALLS, WI 53051 US

FEI Number: 83-1497194

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

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

Authorized Person(s) Detail :

Title MGR
Name CONTINENTAL PROPERTIES REAL ESTATE INCOME FUND IV MANAGER LLC
Address W134N8675 EXECUTIVE PARKWAY
City-State-Zip: MENOMONEE FALLS WI 53051

Title CEO AND CHAIRMAN
Name SCHLOEMER, JAMES H
Address W134N8675 EXECUTIVE PARKWAY
City-State-Zip: MENOMONEE FALLS WI 53051

Title SECRETARY AND EXECUTIVE VICE PRESIDENT
Name SEIFERT, PAUL R
Address W134N8675 EXECUTIVE PARKWAY
City-State-Zip: MENOMONEE FALLS WI 53051

Title VC
Name SEVERSON, GERARD L
Address W134N8675 EXECUTIVE PKWY.
City-State-Zip: MENOMONEE FALLS WI 53051

Title PRESIDENT
Name MINAHAN, DANIEL J
Address W134N8675 EXECUTIVE PARKWAY
City-State-Zip: MENOMONEE FALLS WI 53051

Title TREASURER AND EXECUTIVE VICE PRESIDENT
Name MADELL, EDWARD J
Address W134N8675 EXECUTIVE PARKWAY
City-State-Zip: MENOMONEE FALLS WI 53051

Title EXECUTIVE VICE PRESIDENT
Name GRIMM, KIMBERLY
Address W134N8675 EXECUTIVE PARKWAY
City-State-Zip: MENOMONEE FALLS WI 53051

Title SENIOR VICE PRESIDENT
Name BAGBY, JOSEPH
Address W134N8675 EXECUTIVE PKWY.
City-State-Zip: MENOMONEE FALLS WI 53051

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PAUL R. SEIFERT

SECRETARY & EVP

04/21/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date