

**2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M20000010590

**Entity Name:** PLANTATION CROSSROADS I LLC

**Current Principal Place of Business:**

6031 CONNECTION DRIVE  
STE 200  
IRVING, TX 75039

**Current Mailing Address:**

300 N MAIN STREET STE 402  
GREENSVILLE, SC 29601 US

**FEI Number:** 85-3781085

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T 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 AP  
Name OWENS, YVONNE  
Address 300 N MAIN ST STE 402  
City-State-Zip: GREENVILLE SC 29601

Title AP  
Name FURMAN, KATHERINE D  
Address 717 FIFTH AVE 15TH FLOOR  
City-State-Zip: NEW YORK NY 10022

Title AP  
Name SHULTS, ROB  
Address 6031 CONNECTION DRIVE  
STE 200  
City-State-Zip: IRVING TX 75039

Title M  
Name PLANTATION CROSSROADS MEZZ  
LLC  
Address 6031 CONNECTION DRIVE  
STE 200  
City-State-Zip: IRVING TX 75039

*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:** YVONNE OWENS

**ASSISTANT SECRETARY** 04/19/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date