2023 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M22000017527

Entity Name: LKV REALTY, LLC

FILED Jan 27, 2023 Secretary of State 7254875024CC

Current Principal Place of Business:

4425 PONCE DE LEON BLVD., 2ND FLOOR

CORAL GABLES, FL 33146

Current Mailing Address:

4425 PONCE DE LEON BLVD., 2ND FLOOR CORAL GABLES, FL 33146

FEI Number: 88-3924271 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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 Title **SVPS**

Name KASPER, MAREN Name CARR, THOMAS F

4425 PONCE DE LEON BLVD., 2ND Address 4425 PONCE DE LEON BLVD., 2ND Address

FLOOR FLOOR

City-State-Zip: CORAL GABLES FL 33146 City-State-Zip: CORAL GABLES FL 33146

Title SVP Title SVP, CFO

Name O'BRIEN, RICHARD T JR. Name MAGEE, MICHAEL

4425 PONCE DE LEON BLVD., 2ND 4425 PONCE DE LEON BLVD., 2ND Address Address

FLOOR FLOOR

City-State-Zip: CORAL GABLES FL 33146 City-State-Zip: CORAL GABLES FL 33146

SVP SVP Title Title

Name MAGEE, MICHAEL Name EVENSON, BRETTEL S

Address 4425 PONCE DE LEON BLVD., 2ND Address 4425 PONCE DE LEON BLVD., 2ND

> **FLOOR FLOOR**

City-State-Zip: CORAL GABLES FL 33146 City-State-Zip: CORAL GABLES FL 33146

Title Title SVP VP, MANAGER

ROBERTS, LEWIS JAMES Name Name WILLIAMS, MARVIN

Address 10657 ESSEX SQ BLVD Address 4425 PONCE DE LEON BLVD., 2ND

FLOOR

FT. MEYERS FL 33913 City-State-Zip: City-State-Zip: CORAL GABLES FL 33146

Continues on page 2

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.

01/27/2023 SIGNATURE: THOMAS F. CARR SVP

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued:

SVP Title Title SVP

WAGOVICH, TAMMIE Name STEINMAN, ALISON Name

Address 4425 PONCE DE LEON BLVD., 2ND FLOOR Address 4425 PONCE DE LEON BLVD., 2ND

FLOOR

City-State-Zip: CORAL GABLES FL 33146 City-State-Zip: CORAL GABLES FL 33146

SVP Title Title SVP

Name CHIMIENTI, ANTONIO Name GEILING, GREGORY Address 4425 PONCE DE LEON BLVD., 2ND FLOOR

Address 4425 PONCE DE LEON BLVD., 2ND City-State-Zip: CORAL GABLES FL 33146

FLOOR

CORAL GABLES FL 33146 City-State-Zip: Title SVP, CO-CONTROLLER

Title SVP, CO-CONTROLLER Name GLASSMAN, MARK

Name MCEWAN, ESTER Address 4425 PONCE DE LEON BLVD., 2ND FLOOR

Address 4425 PONCE DE LEON BLVD., 2ND City-State-Zip: CORAL GABLES FL 33146

FLOOR

CORAL GABLES FL 33146 City-State-Zip: FIRST VP Title

BRIGGS, DAVID Name Title VΡ

Address 4425 PONCE DE LEON BLVD., 2ND FLOOR Name BRESLAW, JARED

City-State-Zip: CORAL GABLES FL 33146 Address 4425 PONCE DE LEON BLVD., 2ND

FLOOR

CORAL GABLES FL 33146 City-State-Zip: