

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000052835

Entity Name: ECHO PROPERTIES I, LLC**Current Principal Place of Business:**7980 SUMMERLIN LAKES DRIVE
FORT MYERS, FL 33907**Current Mailing Address:**7980 SUMMERLIN LAKES DRIVE
FORT MYERS, FL 33907 FL**FEI Number:** 27-0299268**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CF REGISTERED AGENT, INC.
100 S. ASHLEY DRIVE
STE 400
TAMPA, FL 33602 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 MGRM
Name BUSEY BANK
Address 100 W. UNIVERSITY AVE.
City-State-Zip: CHAMPAIGN IL 61820

Title MGRM, EVP-CHIEF CREDIT OFFICER
Name PLECKI, ROBERT FJR.
Address 100 W. UNIVERSITY AVE.
City-State-Zip: CHAMPAIGN IL 61820

Title MGRM, SVP-SPECIAL ASSETS
MANAGER
Name HENDERSON, STEVE E
Address 100 W. UNIVERSITY AVE.
City-State-Zip: CHAMPAIGN IL 61820

Title MGRM, EVP-COMMERCIAL CREDIT
LENDING
Name JOHNSON, LARRY
Address 7980 SUMMERLIN LAKES DRIVE
City-State-Zip: FORT MYERS FL 33907

Title MGRM, VP-OREO/SPECIAL ASSETS
MANAGER
Name BARNEY, KATHLEEN F
Address 7980 SUMMERLIN LAKES DRIVE
City-State-Zip: FORT MYERS FL 33907

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: KATHLEEN F. BARNEYMGRM, VP-
OREO/SPECIAL ASSETS
MANAGER

03/02/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date