

**2022 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L12000014766

**Entity Name:** AVH REALTY, LLC**Current Principal Place of Business:**4900 NORTH SCOTTSDALE ROAD  
SUITE 2000  
SCOTTSDALE, AZ 85251**Current Mailing Address:**4900 NORTH SCOTTSDALE ROAD  
SUITE 2000  
SCOTTSDALE, AZ 85251 US**FEI Number:** 45-4462575**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REGISTERED AGENT SOLUTIONS, INC.  
155 OFFICE PLAZA DR  
SUITE A  
TALLAHASSEE, FL 32301 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 AVATAR PROPERTIES, INC.  
Address 4900 NORTH SCOTTSDALE ROAD  
SUITE 2000  
City-State-Zip: SCOTTSDALE AZ 85251

Title VP  
Name BRIONES, TRACY  
Address 2600 LAKE LUCIEN DRIVE  
SUITE 350  
City-State-Zip: MAITLAND FL 32751

Title VP  
Name MULL, LARRY  
Address 2600 LAKE LUCIEN DRIVE  
SUITE 350  
City-State-Zip: MAITLAND FL 32751

Title SECRETARY, EXECUTIVE VICE  
PRESIDENT, CHIEF LEGAL OFFICER  
Name SHERMAN, DARRELL C.  
Address 4900 NORTH SCOTTSDALE ROAD  
SUITE 2000  
City-State-Zip: SCOTTSDALE AZ 85251

Title PRESIDENT  
Name KEMPTON, JOHN STEVEN  
Address 551 NORTH CATTLEMEN RD.  
SUITE 200  
City-State-Zip: SARASOTA FL 34232

Title VP  
Name BRUNHOFER, BRIAN  
Address 2600 LAKE LUCIEN DRIVE  
SUITE 350  
City-State-Zip: MAITLAND FL 32751

Title CFO, EXECUTIVE VICE PRESIDENT  
Name STEFFENS, LOUIS ("LOU") E.  
Address 4900 NORTH SCOTTSDALE ROAD  
SUITE 2000  
City-State-Zip: SCOTTSDALE AZ 85251

Title VP, ASST. SECRETARY  
Name MERRILL, S. TODD  
Address 3030 N. ROCKY POINT DR.  
SUITE 710  
City-State-Zip: TAMPA FL 33607

**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.*

**SIGNATURE:** CAROLINE G. ESTRADA**ASST. SECRETARY****08/26/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date

**Authorized Person(s) Detail Continued :**

Title ASST. SECRETARY  
Name ESTRADA, CAROLINE G.  
Address 4900 NORTH SCOTTSDALE ROAD  
SUITE 2000  
City-State-Zip: SCOTTSDALE AZ 85251

Title ASST. SECRETARY  
Name MCNEIL, CHRISTY A.  
Address 6440 OAK CANYON  
SUITE 200  
City-State-Zip: IRVINE CA 92618

Title VP  
Name DENNIS, LISA  
Address 7785 BAYMEADOWS WAY  
SUITE 105  
City-State-Zip: JACKSONVILLE FL 32256