2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000070050

Entity Name: BCC WEST RESIDENTIAL LLC

Current Principal Place of Business:

501 BRICKELL KEY DRIVE, STE. 600

MIAMI, FL 33131

Current Mailing Address:

501 BRICKELL KEY DRIVE, STE. 600

MIAMI, FL 33131

FEI Number: 35-2503320 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHU, LINDA

501 BRICKELL KEY DRIVE, STE. 600

MIAMI, FL 33131 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: LINDA CHU 04/27/2016

Electronic Signature of Registered Agent

Date

Date

FILED Apr 27, 2016

Secretary of State

CC9597802169

Authorized Person(s) Detail :

Title CEO Title PRESIDENT, ASST. SECRETARY

Name BRADLEY, GUY Name OWENS, STEPHEN L

Address 501 BRICKELL KEY DRIVE, STE. 600 Address 501 BRICKELL KEY DRIVE, STE. 600

City-State-Zip: MIAMI FL 33131 City-State-Zip: MIAMI FL 33131

Title VP Title VP

Name GANDOLFO, CHRISTOPHER Name AGUILA, MAILE

Address 501 BRICKELL KEY DRIVE, STE. 600 Address 501 BRICKELL KEY DRIVE, STE. 600

City-State-Zip: MIAMI FL 33131 City-State-Zip: MIAMI FL 33131

Title VP Title VP

Name CHU, LINDA Name CORTABARRIA, GONZALO

Address 501 BRICKELL KEY DRIVE, STE. 600 Address 501 BRICKELL KEY DRIVE, STE. 600

City-State-Zip: MIAMI FL 33131 City-State-Zip: MIAMI FL 33131

Title ASST. SECRETARY
Name MCMAIN, BEVERLEY

Address 501 BRICKELL KEY DRIVE, STE. 600

City-State-Zip: MIAMI FL 33131

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: LINDA CHU CFO 04/27/2016

Electronic Signature of Signing Authorized Person(s) Detail