

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000185495

Entity Name: BARRON COLLIER MANAGEMENT, LLC

Current Principal Place of Business:

2600 GOLDEN GATE PARKWAY
NAPLES, FL 34105

Current Mailing Address:

2600 GOLDEN GATE PARKWAY
NAPLES, FL 34105 US

FEI Number: 47-2505176

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SONALIA, JEFFREY S
2600 GOLDEN GATE PARKWAY
NAPLES, FL 34105 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: JEFFREY S. SONALIA

04/25/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title DIRECTOR
Name ROBERT, SULLIVAN III
Address 2600 GOLDEN GATE PARKWAY
City-State-Zip: NAPLES FL 34105

Title DIRECTOR
Name VILLERE, LAMAR
Address 2600 GOLDEN GATE PARKWAY
City-State-Zip: NAPLES FL 34105

Title DIRECTOR
Name KUNDE, CHELSEA
Address 2600 GOLDEN GATE PARKWAY
City-State-Zip: NAPLES FL 34105

Title DIRECTOR
Name CLEMENS, PHILLIP
Address 2600 GOLDEN GATE PARKWAY
City-State-Zip: NAPLES FL 34105

Title CHAIRMAN / DIRECTOR
Name CECIL, JACK
Address 2600 GOLDEN GATE PARKWAY
City-State-Zip: NAPLES FL 34105

Title DIRECTOR
Name SENKBEIL, THOMAS
Address 2600 GOLDEN GATE PARKWAY
City-State-Zip: NAPLES FL 34105

Title DIRECTOR
Name COLLIER, BARRON G III
Address 2600 GOLDEN GATE PARKWAY
City-State-Zip: NAPLES FL 34105

Title PRESIDENT, CEO
Name GABLE, R. BLAKESLEE
Address 2600 GOLDEN GATE PARKWAY
City-State-Zip: NAPLES FL 34105

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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: JEFFREY SONALIA

CFO

04/25/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title CIO
Name GOGUEN, BRIAN
Address 2600 GOLDEN GATE PARKWAY
City-State-Zip: NAPLES FL 34105

Title PRESIDENT OF DEVELOPMENT
Name GENSON, DAVID
Address 2600 GOLDEN GATE PARKWAY
City-State-Zip: NAPLES FL 34105

Title CFO
Name SONALIA, JEFF
Address 2600 GOLDEN GATE PARKWASY
City-State-Zip: NAPLES FL 34105