

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000141489

Entity Name: AVH NORTH FLORIDA, 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:** 47-4935307**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REGISTERED AGENT SOLUTIONS, INC.
2894 REMINGTON GREEN LANE
SUITE A
TALLAHASSEE, FL 32308 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 PRESIDENT
Name KEMPTON, JOHN STEVEN
Address 551 NORTH CATTLEMEN RD.
 SUITE 200
City-State-Zip: SARASOTA FL 34232

Title CFO, EXECUTIVE VICE PRESIDENT
Name VANHYFTE, CURTIS ("CURT")
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

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

Title VP
Name FELLOWS, JEFFREY ("JEFF")
Address 2600 LAKE LUCIEN DRIVE
 SUITE 350
City-State-Zip: MAITLAND FL 32751

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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: CAROLINE G. ESTRADA**ASST. SECRETARY****01/17/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

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

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

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

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

Title VP
Name MILLER, FREDERICK ("FRED")
Address 2600 LAKE LUCIEN DRIVE
SUITE 350
City-State-Zip: MAITLAND FL 32751

Title AUTHORIZED AGENT
(JACKSONVILLE) - FINANCE
Name FELVER, CARROLLINE
Address 7785 BAYMEADOWS WAY
SUITE 105
City-State-Zip: JACKSONVILLE FL 32256

Title AUTHORIZED AGENT
(JACKSONVILLE) - LAND
ACQUISITION; LAND DEVELOPMENT
Name OWENS, MICHAEL
Address 7785 BAYMEADOWS WAY
SUITE 105
City-State-Zip: JACKSONVILLE FL 32256

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