

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000208748

Entity Name: VTC JACKSONVILLE OFFICE PARK DEVELOPMENT HOLDING COMPANY, LLC

FILED
Mar 06, 2023
Secretary of State
7121348569CC

Current Principal Place of Business:

1550 E MISSOURI AVE, STE 300
PHOENIX, AZ 85014

Current Mailing Address:

1550 E MISSOURI AVE, STE 300
PHOENIX, AZ 85014 US

FEI Number: 81-1055105

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 MANAGER
Name VAN TUYL, LARRY
Address 1550 E MISSOURI AVE, STE 300
City-State-Zip: PHOENIX AZ 85014

Title MANAGER
Name PACHECO, MICHAEL
Address 1550 E MISSOURI AVE, STE 300
City-State-Zip: PHOENIX AZ 85014

Title MANAGER
Name HARRISON, DAVID
Address 1550 E MISSOURI AVE, STE 300
City-State-Zip: PHOENIX AZ 85014

Title MEMBER
Name VTC FL INVESTMENTS INC.
Address 1550 E MISSOURI AVE, STE 300
City-State-Zip: PHOENIX AZ 85014

Title MEMBER
Name JLVT 2009 TRUST
Address 1550 E MISSOURI AVE, STE 300
City-State-Zip: PHOENIX AZ 85014

Title MEMBER
Name TAVT 2009 TRUST
Address 1550 E MISSOURI AVE, STE 300
City-State-Zip: PHOENIX AZ 85014

Title MEMBER
Name VNVT 2009 TRUST
Address 1550 E MISSOURI AVE, STE 300
City-State-Zip: PHOENIX AZ 85014

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: VAN TUYL, LARRY

MANAGER

03/06/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date