

2018 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L16000175538

Entity Name: THE VILLAGES LAND COMPANY, LLC**Current Principal Place of Business:**3619 KIESSEL ROAD
THE VILLAGES, FL 32163**Current Mailing Address:**3619 KIESSEL ROAD
THE VILLAGES, FL 32163 US**FEI Number:** 81-4355652**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HUDSON, BRIAN D.
3617 KIESSEL ROAD
THE VILLAGES, FL 32163 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 MGR
Name TVL COMPANY, LLC
Address 3619 KIESSEL ROAD
City-State-Zip: THE VILLAGES FL 32163

Title VP
Name WEST, MICHAEL E.
Address 3619 KIESSEL ROAD
City-State-Zip: THE VILLAGES FL 32163

Title VP
Name MCDOWELL, DODD
Address 3619 KIESSEL ROAD
City-State-Zip: THE VILLAGES FL 32163

Title VP
Name HESS, RONALD G.
Address 3619 KIESSEL ROAD
City-State-Zip: THE VILLAGES FL 32163

Title VP
Name CICHIELO, JAMES A.
Address 3619 KIESSEL ROAD
City-State-Zip: THE VILLAGES FL 32163

Title VP
Name CARTER, STEVEN D.
Address 3619 KIESSEL ROAD
City-State-Zip: THE VILLAGES FL 32163

Title VP
Name LAMMER, GREG
Address 3619 KIESSEL ROAD
City-State-Zip: THE VILLAGES FL 32163

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: ROBERT L. CHANDLER IVMANAGER, TVL
COMPANY, LLC,
MANAGER

07/03/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date