2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000207058

Entity Name: GREENEWAY PARK HOTEL, LLC

Current Principal Place of Business:

6900 TAVISTOCK LAKES BLVD STE 200

ORLANDO, FL 32827

Current Mailing Address:

6900 TAVISTOCK LAKES BLVD STE200 ORLANDO. FL 32827 US

FEI Number: 30-1006115 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NATIONAL REGISTERED AGENTS, INC 1200 SOUTH PINE ISLAND RD 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

FILED Mar 30, 2023

Secretary of State

5146651981CC

Authorized Person(s) Detail:

Title VP/S Title VP

Name RENCORET, MICHELLE R Name THAKKAR, RASESH

Address 6900 TAVISTOCK LAKES BLVD STE Address 6900 TAVISTOCK LAKES BLVD STE

ORLANDO FL 32827 City-State-Zip: ORLANDO FL 32827

Title VP Title VP

Name BEUCHER, NICHOLAS F III Name WEAVER, BENJAMIN A

Address 6900 TAVISTOCK LAKES BLVD STE Address 6900 TAVISTOCK LAKES BLVD STE

City-State-Zip: ORLANDO FL 32827 City-State-Zip: ORLANDO FL 32827

Title P Title VP

Name COLLIN, T CRAIG Name GANDOLFO, CHRISTOPHER

Address 6900 TAVISTOCK LAKES BLVD STE Address 6900 TAVISTOCK LAKES BLVD STE

200

City-State-Zip: ORLANDO FL 32827 City-State-Zip: ORLANDO FL 32827

Title VPT

Name BYRNES, DANIEL

200

Address 6900 TAVISTOCK LAKES BLVD STE

200

City-State-Zip: ORLANDO FL 32827

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: BENJAMIN A. WEAVER VICE PRESIDENT 03/30/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date