

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000018313

**Entity Name:** ZOM LUMA MWC GP, LLC

**Current Principal Place of Business:**

2001 SUMMIT PARK DR STE 300  
ORLANDO, FL 32810

**Current Mailing Address:**

2001 SUMMIT PARK DR STE 300  
ORLANDO, FL 32810

**FEI Number: 38-4074800**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 US

**FILED**  
**Apr 24, 2020**  
**Secretary of State**  
**0231037768CC**

*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           MANAGING MEMBER  
Name           ZF DEVELOPMENT II, LP  
Address        2001 SUMMIT PARK DR STE 300  
City-State-Zip: ORLANDO FL 32810

Title           PRESIDENT, CEO  
Name           WEST, GREGORY T  
Address        2001 SUMMIT PARK DR STE 300  
City-State-Zip: ORLANDO FL 32810

Title           EVP, CFO, TREASURER  
Name           WARNER, BRIAN J  
Address        2001 SUMMIT PARK DR STE 300  
City-State-Zip: ORLANDO FL 32810

Title           VP  
Name           HEMMINGER, DARRYL J  
Address        2001 SUMMIT PARK DR STE 300  
City-State-Zip: ORLANDO FL 32810

Title           SVP  
Name           HATCHER, GRAHAM D  
Address        2001 SUMMIT PARK DR STE 300  
City-State-Zip: ORLANDO FL 32810

Title           VP  
Name           CLAYTON, KYLE R  
Address        2001 SUMMIT PARK DR STE 300  
City-State-Zip: ORLANDO FL 32810

Title           EVP  
Name           STEPHENS, SAMUEL C III  
Address        2001 SUMMIT PARK DR STE 300  
City-State-Zip: ORLANDO FL 32810

*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: SAMUEL C. STEPHENS, III**

**EVP**

**04/24/2020**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date