

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000238158

**Entity Name:** MHP NEW RIVER LANDING MEMBER, LLC**Current Principal Place of Business:**601 BRICKELL KEY DRIVE, SUITE 700  
MIAMI, FL 33131**Current Mailing Address:**601 BRICKELL KEY DRIVE, SUITE 700  
MIAMI, FL 33131**FEI Number:** 85-0549547**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 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	MBR
Name	SHEAR HOLDINGS, LLC
Address	601 BRICKELL KEY DRIVE, SUITE 700
City-State-Zip:	MIAMI FL 33131

Title	MBR
Name	W. PATRICK MCDOWELL 2001 TRUST
Address	601 BRICKELL KEY DRIVE, SUITE 700
City-State-Zip:	MIAMI FL 33131

Title	MBR
Name	ARCHIPELAGO HOUSING, LLC
Address	601 BRICKELL KEY DRIVE, SUITE 700
City-State-Zip:	MIAMI FL 33131

Title	MGR
Name	W. PATRICK MCDOWELL 2001 TRUST
Address	601 BRICKELL KEY DRIVE, SUITE 700
City-State-Zip:	MIAMI FL 33131

Title	MGR
Name	ARCHIPELAGO HOUSING, LLC
Address	601 BRICKELL KEY DRIVE, SUITE 700
City-State-Zip:	MIAMI FL 33131

*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:** MARIO SARIOL**CFO****02/12/2021**\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date