

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000382651

**Entity Name:** CRP-AVB MM, LLC

**Current Principal Place of Business:**

242 INVERNESS CENTER DRIVE  
BIRMINGHAM, AL 35242

**Current Mailing Address:**

242 INVERNESS CENTER DRIVE  
BIRMINGHAM, AL 35242

**FEI Number: 85-4172340**

**Certificate of Status Desired: No**

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

LOWITZ, STEPHEN  
3521 N 53RD AVE  
HOLLYWOOD, FL 33021 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 MOORE, JOHN  
Address 242 INVERNESS CENTER DRIVE  
City-State-Zip: BIRMINGHAM AL 35242

Title MGR  
Name SURMALL, DAVID  
Address 242 INVERNESS CENTER DRIVE  
City-State-Zip: BIRMINGHAM AL 35243

Title MGR  
Name JOHNSTON, SAM  
Address 242 INVERNESS CENTER DRIVE  
City-State-Zip: BIRMINGHAM AL 35242

Title MGR  
Name LOWITZ, STEPHEN  
Address 242 INVERNESS CENTER DRIVE  
City-State-Zip: BIRMINGHAM AL 35242

Title MGR  
Name EHRENSTEIN, GABE  
Address 242 INVERNESS CENTER DRIVE  
City-State-Zip: BIRMINGHAM AL 35242

*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: STEPHEN LOWITZ**

**MEMBER**

**03/25/2022**

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

\_\_\_\_\_  
Date