

2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000000400

Entity Name: HOMETOWN UNIVERSITY LAKES, L.L.C.**Current Principal Place of Business:**C/O HOMETOWN AMERICA 150 N. WACKER DRIVE
SUITE 2800
CHICAGO, IL 60606**Current Mailing Address:**C/O HOMETOWN AMERICA 150 N. WACKER DRIVE
SUITE 2800
CHICAGO, IL 60606**FEI Number:** 36-4196688**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
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:**

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

| | |
|-----------------|---|
| Title | MGR |
| Name | HOMETOWN RESIDENTIAL MANAGER, L.L.C. |
| Address | 150 N. WACKER DR. STE 2800 |
| City-State-Zip: | CHICAGO IL 60606 |

| | |
|-----------------|--|
| Title | P |
| Name | BRAUN, STEPHEN H |
| Address | C/O HTA, 150 N WACKER DR SUITE 2800 |
| City-State-Zip: | CHICAGO IL 60606 |

| | |
|-----------------|--|
| Title | P |
| Name | ZILIS, PATRICK C |
| Address | C/O HTA, 150 N WACKER DR SUITE 2800 |
| City-State-Zip: | CHICAGO IL 60606 |

| | |
|-----------------|---------------------------------------|
| Title | COO, ASST. SECRETARY |
| Name | BRAUN, STEPHEN H |
| Address | C/O HTA 150 N WACKER DR SUITE 2800 |
| City-State-Zip: | CHICAGO IL 60606 |

| | |
|-----------------|---------------------------------------|
| Title | VP,T |
| Name | CURATOLO, THOMAS |
| Address | C/O HTA 150 N WACKER DR SUITE 2800 |
| City-State-Zip: | CHICAGO IL 60606 |

| | |
|-----------------|---|
| Title | CFO, ASST. SECRETARY |
| Name | ZILIS, PATRICK C |
| Address | C/O HOMETOWN AMERICA 150 N. WACKER DRIVE SUITE 2800 |
| City-State-Zip: | CHICAGO IL 60606 |

| | |
|-----------------|---|
| Title | SECRETARY |
| Name | NAGEL, NANCY |
| Address | C/O HOMETOWN AMERICA 150 N. WACKER DRIVE SUITE 2800 |
| City-State-Zip: | CHICAGO IL 60606 |

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 H. BRAUN**CO-PRESIDENT****04/11/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date