

**2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M01000001251

**Entity Name:** 1980 SUNSET POINT ROAD, LLC

**Current Principal Place of Business:**

101 EAST STATE STREET  
KENNETT SQUARE, PA 19348

**Current Mailing Address:**

101 EAST STATE STREET  
KENNETT SQUARE, PA 19348 US

**FEI Number:** 06-1621890

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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            PRESIDENT  
Name            EVANS, CHRISTOPHER BRAD  
Address        101 EAST STATE STREET  
City-State-Zip: KENNETT SQUARE PA 19348

Title            VP  
Name            WIESS, MARK  
Address        101 EAST STATE STREET  
City-State-Zip: KENNETT SQUARE PA 19348

Title            TREASURER  
Name            EDWARDS, RICHARD J  
Address        101 EAST STATE STREET  
City-State-Zip: KENNETT SQUARE PA 19348

Title            SECRETARY  
Name            SHERMAN, MICHAEL S  
Address        101 EAST STATE STREET  
City-State-Zip: KENNETT SQUARE PA 19348

Title            ASST. SECRETARY  
Name            BERG, MICHAEL T  
Address        101 EAST STATE STREET  
City-State-Zip: KENNETT SQUARE PA 19348

*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:** MICHAEL S SHERMAN

**SECRETARY**

**01/04/2017**

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

\_\_\_\_\_  
Date