

**2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M09000004113

**Entity Name:** DFC LAND, L.L.C.

**Current Principal Place of Business:**

430 MAIN STREET  
WILLIAMSTOWN, MA 01267

**Current Mailing Address:**

430 MAIN STREET  
WILLIAMSTOWN, MA 01267

**FEI Number:** 90-0429299

**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 MGRM  
Name DEVELOPER FINANCE CORPORATION  
Address 430 MAIN STREET  
City-State-Zip: WILLIAMSTOWN MA 01267

Title S  
Name BACKIEL, AMY E  
Address 430 MAIN STREET  
City-State-Zip: WILLIAMSTOWN MA 01267

Title T  
Name STRATTON, RICHARD A  
Address 430 MAIN STREET  
City-State-Zip: WILLIAMSTOWN MA 01267

Title MANAGER  
Name MAHAN, FRANCIS T  
Address 430 MAIN STREET  
City-State-Zip: WILLIAMSTOWN MA 01267

Title MANAGER  
Name KING, JEFFREY P.  
Address 430 MAIN STREET  
City-State-Zip: WILLIAMSTOWN MA 01267

Title MANAGER  
Name MEEHAN, KRISTEN  
Address 430 MAIN STREET  
City-State-Zip: WILLIAMSTOWN MA 01267

*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:** JEFFREY P. KING

**MANAGER**

**01/10/2017**

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

\_\_\_\_\_  
Date