

**2016 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# M10000003984

**Entity Name:** T-C SHOPPES AT MONARCH LAKES LLC

**Current Principal Place of Business:**

730 THIRD AVENUE  
NEW YORK, NY 10017

**Current Mailing Address:**

730 THIRD AVENUE  
NEW YORK, NY 10017

**FEI Number:** 27-3415834

**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 SECRETARY  
Name NICHOLS, ANNETTE  
Address 730 THIRD AVENUE  
City-State-Zip: NEW YORK NY 10017

Title MANAGER  
Name TIAA-CREF ALTERNATIVES  
ADVISORS, LLC  
Address 730 THIRD AVENUE  
City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED SIGNER  
Name BAIR, SHARON  
Address 8500 ANDREW CARNEGIE BLVD  
City-State-Zip: CHARLOTTE NC 28262

Title AUTHORIZED SIGNER  
Name ROLLINS, TODD  
Address 730 THIRD AVE  
City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED SIGNER  
Name RAGLAND, JOHN  
Address 8500 ANDREW CARNEGIE BLVD  
City-State-Zip: CHARLOTTE NC 28262

Title AUTHORIZED SIGNER  
Name FISK, MICHAEL  
Address 8500 ANDREW CARNEGIE BLVD  
City-State-Zip: CHARLOTTE NC 28262

Title AUTHORIZED SIGNER  
Name SIMPKINS, BRAD  
Address 8500 ANDREW CARNEGIE BLVD  
City-State-Zip: CHARLOTTE NC 28262

Title VICE PRESIDENT  
Name CORNUKE, JOHN  
Address 4675 MACARTHUR COURT  
SUITE 1100  
City-State-Zip: NEW PORT BEACH CA 92660

*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:** SHARON BAIR

**AUTHORIZED SIGNER**

**10/21/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date