

2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M13000001023

Entity Name: W R C PROPERTIES, LLC

Current Principal Place of Business:

730 THIRD AVE
NEW YORK, NY 10017

FILED
Apr 23, 2021
Secretary of State
1994563421CC

Current Mailing Address:

730 THIRD AVE
MS: 730/12/02
NEW YORK, NY 10017 US

FEI Number: 51-0141732

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 AUTHORIZED REPRESENTATIVE
Name RAMOS, JANET
Address 730 THIRD AVE
City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED REPRESENTATIVE
Name BAIR, SHARON E.
Address 730 THIRD AVE
City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED REPRESENTATIVE
Name CORNUKE, JOHN
Address 730 THIRD AVE
City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED REPRESENTATIVE
Name HANCOCK, ALEXANDER E.
Address 730 THIRD AVE
City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED REPRESENTATIVE
Name ROLLINS, TODD HOWARD
Address 730 THIRD AVENUE
City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED REPRESENTATIVE
Name COHEN, DONNA
Address 730 THIRD AVE
City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED REPRESENTATIVE
Name JOSEPH, JILLIAN E.
Address 730 THIRD AVE
City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED REPRESENTATIVE
Name MARTIN, MANUEL
Address 730 THIRD AVE
City-State-Zip: NEW YORK NY 10017

Continues on page 2

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: MARY CATHERINE BENEDETTO

SECRETARY

04/23/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title AUTHORIZED REPRESENTATIVE
Name MILLER, NANCY
Address 730 THIRD AVE
City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED REPRESENTATIVE
Name STEFFENS, GABRIEL
Address 730 THIRD AVE
City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED MEMBER
Name TEACHERS INSURANCE AND ANNUITY
ASSOCIATION OF AMERICA
Address 730 THIRD AVE
City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED SIGNER
Name RUSSO, CHARLES C.
Address 501 BRICKELL KEY DRIVE
SUITE 504
City-State-Zip: MIAMI FL 33131

Title AUTHORIZED REPRESENTATIVE
Name CHAPERON, JULIEN
Address 730 THIRD AVE
City-State-Zip: NEW YORK NY 10017

Title SECRETARY
Name BENEDETTO, MARY CATHERINE
Address 730 THIRD AVE
City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED REPRESENTATIVE
Name MILLER, WILLIAM M.
Address 730 THIRD AVE
City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED REPRESENTATIVE
Name WEINDLING, FRANCESCA
Address 730 THIRD AVE
City-State-Zip: NEW YORK NY 10017

Title ASSISTANT SECRETARY
Name DAVIS , MARTINA
Address 730 THIRD AVE
City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED REPRESENTATIVE
Name BOAN, RYAN
Address 730 THIRD AVE
City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED SIGNER
Name ADAMS, CHRISTOPHER C.
Address 501 BRICKELL KEY DRIVE
SUITE 504
City-State-Zip: MIAMI FL 33131