## 2019 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M13000001023

Entity Name: WRCPROPERTIES, LLC

**Current Principal Place of Business:** 

730 THIRD AVE

NEW YORK, NY 10017

**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

FILED Apr 24, 2019

Secretary of State 8190558992CC

Authorized Person(s) Detail:

Title AUTHORIZED REPRESENTATIVE Title AUTHORIZED REPRESENTATIVE

NameSIMPKINS, BRAD E.NameRAGLAND, JOHNAddress730 THIRD AVEAddress730 THIRD AVE

City-State-Zip: NEW YORK NY 10017 City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED REPRESENTATIVE Title AUTHORIZED REPRESENTATIVE

NameACOSTA, JANETNameBAIR, SHARON E.Address730 THIRD AVEAddress730 THIRD AVE

City-State-Zip: NEW YORK NY 10017 City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED REPRESENTATIVE Title AUTHORIZED REPRESENTATIVE

Name CORNUKE, JOHN Name HANCOCK, ALEXANDER E.

Address 730 THIRD AVE Address 730 THIRD AVE

City-State-Zip: NEW YORK NY 10017 City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED REPRESENTATIVE Title AUTHORIZED REPRESENTATIVE

Name ROLLINS, TODD HOWARD Name COHEN, DONNA
Address 730 THIRD AVENUE Address 730 THIRD AVE

City-State-Zip: NEW YORK NY 10017 City-State-Zip: NEW YORK NY 10017

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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: MARTINA DAVIS SECRETARY 04/24/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued:

Title AUTHORIZED REPRESENTATIVE

Name FISK, MICHAEL D. Address 730 THIRD AVE

City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED REPRESENTATIVE

Name HERTER III, WALTER BEH

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

Title AUTHORIZED REPRESENTATIVE

Name MILLER, WILLIAM M.

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 REPRESENTATIVE

Name CIFELLI, NICHOLAS Address 730 THIRD AVE

City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED REPRESENTATIVE, SECRETARY

Name DAVIS , MARTINA Address 730 THIRD AVE

City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED REPRESENTATIVE

Name GRIMALDI, ANTHONY

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 REPRESENTATIVE

Name CHAPERON, JULIEN
Address 730 THIRD AVE

City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED REPRESENTATIVE

Name GIRALDO, RANDY 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 MILLER, NANCY
Address 730 THIRD AVE

City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED REPRESENTATIVE

Name PIERRE-MERRITT, MARJORIE

Address 730 THIRD AVE

12TH FLOOR MS:730/12/02

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 AUTHORIZED MEMBER

Name TEACHERS INSURANCE AND

ANNUITY ASSOCIATION OF AMERICA

Address 730 THIRD AVE

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Title AUTHORIZED REPRESENTATIVE

Name DE ALCANTARA, ADRIANA

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 ROLLINS, TODD 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