

**2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M13000001023

**Entity Name:** W R C PROPERTIES, LLC

**Current Principal Place of Business:**

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

**FILED**  
**May 01, 2017**  
**Secretary of State**  
**CC2023586966**

**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 SIMPKINS, BRAD  
Address 730 THIRD AVE  
City-State-Zip: NEW YORK NY 10017

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

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

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

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

Title AUTHORIZED REPRESENTATIVE  
Name CANTU, NICOLE  
Address 730 THIRD AVENUE  
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: MAJORIE PIERRE-MERRITT**

**SECRETARY**

**05/01/2017**

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

\_\_\_\_\_  
Date

**Authorized Person(s) Detail Continued :**

Title AUTHORIZED REPRESENTATIVE  
Name CASIMIR, GERALD  
Address 730 THIRD AVE  
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 GIRALDO, RANDY  
Address 730 THIRD AVE  
City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED REPRESENTATIVE  
Name JENKINS, JAMIN  
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 MCGIBBON, G. CHRISTOPHER  
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 SECRETARY, AUTHORIZED REPRESENTATIVE  
Name PIERRE-MERRITT, MARJORIE  
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  
Name ROLLINS, TODD  
Address 730 THIRD AVENUE  
City-State-Zip: NEW YORK NY 10017

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

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

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

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

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

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

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