

2024 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

Current Mailing Address:

730 THIRD AVE
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 SIGNER
Name WATERS, KATE
Address 8500 ANDREW CARNEGIE BLVD.
City-State-Zip: CHARLOTTE NC 28262

Title AUTHORIZED REPRESENTATIVE
Name CORNUKE, JOHN
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 MILLER, NANCY
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

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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: WAYNE A. AGARD

SECRETARY

04/30/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

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

Title AUTHORIZED SIGNER
Name PFLAUM, LAURY
Address 14055 RIVEREDGE DRIVE
City-State-Zip: TAMPA FL 33637

Title AUTHORIZED MEMBER
Name TEACHERS INSURANCE AND
ANNUITY ASSOCIATION OF AMERICA
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

Title AUTHORIZED SIGNER
Name CLARK, KATHY
Address 75 ISHAM ROAD
City-State-Zip: WEST HARTFORD CT 06107