## **2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M13000005397

Entity Name: BSREP II WS ORLANDO EAST, LLC

**Current Principal Place of Business:** 

BROOKWOOD HOTELS, 8621 E. 21ST STREET NORTH

SUITE 230

WICHITA, KS 67206

**Current Mailing Address:** 

BROOKWOOD HOTELS, 8621 E. 21ST STREET NORTH, SUITE 230

WICHITA, KS 67206 US

FEI Number: 36-4767515 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

Title

SENIOR VICE PRESIDENT

Authorized Person(s) Detail:

Title MANAGER, MEMBER Title MEMBER

Name BSREP II WS HOTEL TERM MM LLC Name BSREP II WS HOTEL TERM MEZZ A

Address BROOKWOOD HOTELS, 8621 E 21ST

STREET N. Address BROOKWOOD HOTELS, 8621 E 21ST STREET N. SUITE 230

SUITE 230

City-State-Zip: WICHITA KS 67206

City-State-Zip: WICHITA KS 67206

Title COO

Title SENIOR VICE PRESIDENT
Name WRIGHT, DARIEN

Address 799 9TH STREET NW, SUITE 260

Address 250 VESEY STREET, 15TH FLOOR
City-State-Zip: WASHINGTON DC 20001

City-State-Zip: NEW YORK NY 10281

Title SECRETARY

Name SCHOENBERGER, LAURA Name CLAYTON, ROY (ZIGGY)

Address BROOKWOOD HOTELS, 8621 E. 21ST STREET NORTH, SUITE 230 Address 10801 MONROE RD, SUITE B

City-State-Zip: WICHITA KS 67206 City-State-Zip: MATTHEWS NC 28105

Title TREASURER Title VP

Name WILLEY, RYAN Name ZYSOPOULOS, JAMES

Address 1997 ANNAPOLIS EXCHANGE PKWY. Address 250 VESEY STREET, 15TH FLOOR

SUITE 550 City-State-Zip: NEW YORK NY 10281

City-State-Zip: ANNAPOLIS MD 21401

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: LAURA SCHOENBERGER SECRETARY 05/04/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED May 04, 2020

Secretary of State

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