

**2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M13000005528

Entity Name: BP LESSOR, LLC

**Current Principal Place of Business:**

68 SOUTH SERVICE ROAD  
SUITE 120  
MELVILLE, NY 11747

**Current Mailing Address:**

68 SOUTH SERVICE ROAD  
SUITE 120  
MELVILLE, NY 11747

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

**Name and Address of Current Registered Agent:**

NATIONAL CORPORATE RESEARCH,LTD.,INC.  
115 NORTH CALHOUN ST.  
SUITE 4  
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 MGRM  
Name GSS (BP LESSOR), INC.  
Address 68 SOUTH SERVICE ROAD, SUITE 120  
City-State-Zip: MELVILLE NY 11747

Title MANAGER  
Name MCCULLOUGH, JULIA A  
Address 68 SOUTH SERVICE ROAD  
SUITE 120  
City-State-Zip: MELVILLE NY 11747

Title VP, ASST TREAS, ASST SEC,  
DIRECTOR  
Name BILOTTA, FRANK B.  
Address 68 SOUTH SERVICE ROAD  
SUITE 120  
City-State-Zip: MELVILLE NY 11747

Title VP, ASST TREAS, ASST SEC  
Name THOMPSON, CHRISTOPHER W.  
Address 68 SOUTH SERVICE ROAD  
SUITE 120  
City-State-Zip: MELVILLE NY 11747

Title VP, ASST TREAS, ASST SEC  
Name O'CONNOR, TIMOTHY  
Address 68 SOUTH SERVICE ROAD  
SUITE 120  
City-State-Zip: MELVILLE NY 11747

Title VP, ASST. TREAS, ASST SEC  
Name RUSSO, JILL A.  
Address 68 SOUTH SERVICE ROAD  
SUITE 120  
City-State-Zip: MELVILLE NY 11747

Title VP, ASST TREAS, ASST SEC  
Name FRIDLINGTON, JOHN L.  
Address 68 SOUTH SERVICE ROAD  
SUITE 120  
City-State-Zip: MELVILLE NY 11747

Title VP, ASST TREAS, SECRETARY,  
DIRECTOR  
Name ANGELO, BERNARD J.  
Address 68 SOUTH SERVICE ROAD  
SUITE 120  
City-State-Zip: MELVILLE NY 11747

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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: JILL A. RUSSO

VP, ASST. TREAS, ASST SEC 04/14/2017

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

Title            PRESIDENT, TREASURER, ASST. SEC,  
                     DIRECTOR  
Name            BURNS, KEVIN P.  
Address        68 SOUTH SERVICE ROAD  
                     SUITE 120  
City-State-Zip: MELVILLE NY 11747

Title            DIRECTOR  
Name            PEREZ, DAMIAN A  
Address        68 SOUTH SERVICE ROAD  
                     SUITE 120  
City-State-Zip: MELVILLE NY 11747