2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M14000003261

Entity Name: THOMAS RANCH LAND PARTNERS GP, LLC

Current Principal Place of Business:

4901 VINELAND ROAD

SUITE 450

ORLANDO, FL 32811

Current Mailing Address:

4901 VINELAND ROAD

SUITE 450

ORLANDO, FL 32811 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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:

Name

Electronic Signature of Registered Agent

Date

FILED Mar 09. 2023

Secretary of State

0253003481CC

Authorized Person(s) Detail:

Title MANAGER

THOMAS RANCH MANAGER, LLC

Address 4901 VINELAND ROAD

SUITE 450

City-State-Zip: ORLANDO FL 32811

Title PRESIDENT, DIRECTOR

Name BASS, KEITH E

Address 4901 VINELAND ROAD

S 4901 VINELAND RO

SUITE 450

City-State-Zip: ORLANDO FL 32811

Title VP

Name SEVERANCE, RICHARD

Address 4901 VINELAND ROAD

SUITE 450

City-State-Zip: ORLANDO FL 32811

Title VP

Name GRANEY, TIMOTHY

Address 4901 VINELAND ROAD

SUITE 450

City-State-Zip: ORLANDO FL 32811

Title SECRETARY, VP, DIRECTOR,

AUTHORIZED REPRESENTATIVE

Name HARRIS, ROBERT A IV

Address C/O HARRIS LAW FIRM

P.O. BOX 7474

City-State-Zip: RICHMOND VA 23221

Title VP

Name LUCZYNSKI, JOHN

Address 4901 VINELAND ROAD

SUITE 450

City-State-Zip: ORLANDO FL 32811

Title VP

Name LEWIS, STEVEN

Address 4901 VINELAND ROAD

SUITE 450

City-State-Zip: ORLANDO FL 32811

Title VP

Name BOLEN, CHARLES PHILIP

Address 4901 VINELAND ROAD

SUITE 450

City-State-Zip: ORLANDO FL 32811

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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: ROBERT A. HARRIS IV SECRETARY 03/09/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued:

Title ASST. VP Title VP

Name VANADIA, CHELSEA C Name NELSON, CLIFFORD L
Address 4901 VINELAND ROAD Address 4901 VINELAND ROAD

SUITE 450

City-State-Zip: ORLANDO FL 32811 City-State-Zip: ORLANDO FL 32811

Title VP Title VP

Name BASELICE, DAVID Name MORRISON, DIANE
Address 4901 VINELAND ROAD Address 4901 VINELAND ROAD

SUITE 450 SUITE 450

SUITE 450

City-State-Zip: ORLANDO FL 32811 City-State-Zip: ORLANDO FL 32811

Title VP Title VP

Name MANCHESTER, ELIZABETH Name THOMAS, JASON

Address 4901 VINELAND ROAD Address 4901 VINELAND ROAD

SUITE 450 SUITE 450

City-State-Zip: ORLANDO FL 32811 City-State-Zip: ORLANDO FL 32811

Title ASST. VP Title VP

Name DROOR, JONATHAN Name MCGUIRE, KATHLEEN M

Address 4901 VINELAND ROAD Address 4901 VINELAND ROAD

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City-State-Zip: ORLANDO FL 32811 City-State-Zip: ORLANDO FL 32811

Title VP Title VP

Name NIELSEN, LAUREN Name SWARTZ, NICOLE MARGINIAN

Address 4901 VINELAND ROAD Address 4901 VINELAND ROAD

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City-State-Zip: ORLANDO FL 32811 City-State-Zip: ORLANDO FL 32811

Title VP Title VP

Name SQUIRES, PHILIP Name MEYN, ROBERT

Address 4901 VINELAND ROAD Address 4901 VINELAND ROAD

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