

**2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M1400004580

**FILED**  
**Apr 26, 2019**  
**Secretary of State**  
**4346057127CC**

**Entity Name:** BRE DDR BR FORUM FL LLC

**Current Principal Place of Business:**

3300 ENTERPRISE PARKWAY  
BEACHWOOD, OH 44122

**Current Mailing Address:**

3300 ENTERPRISE PARKWAY  
BEACHWOOD, OH 44122

**FEI Number:** 47-1664719

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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           SOLE MEMBER  
Name           BRE DDR BR ALPHA LLC  
Address        3300 ENTERPRISE PARKWAY  
City-State-Zip: BEACHWOOD OH 44122

Title           PRESIDENT, CEO  
Name           LUKES, DAVID R  
Address        3300 ENTERPRISE PARKWAY  
City-State-Zip: BEACHWOOD OH 44122

Title           EVP  
Name           MAKINEN, MICHAEL A  
Address        3300 ENTERPRISE PARKWAY  
City-State-Zip: BEACHWOOD OH 44122

Title           TREASURER, CFO  
Name           OSTROWER, MATTHEW L  
Address        3300 ENTERPRISE PARKWAY  
City-State-Zip: BEACHWOOD OH 44122

Title           EVP  
Name           VESY, CHRISTA A  
Address        3300 ENTERPRISE PARKWAY  
City-State-Zip: BEACHWOOD OH 44122

Title           SVP  
Name           CHURA, JOSEPH E  
Address        3300 ENTERPRISE PARKWAY  
City-State-Zip: BEACHWOOD OH 44122

Title           SVP  
Name           LOPEZ, JOSEPH A  
Address        3300 ENTERPRISE PARKWAY  
City-State-Zip: BEACHWOOD OH 44122

Title           SECRETARY/EVP  
Name           KITLOWSKI, AARON M  
Address        3300 ENTERPRISE PARKWAY  
City-State-Zip: BEACHWOOD OH 44122

**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:** APRIL M EHRENBEIT

**SR DIRECTOR OF TAX**

**04/26/2019**

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

\_\_\_\_\_  
Date

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

Title SVP  
Name CATTONAR, JOHN M  
Address 3300 ENTERPRISE PARKWAY  
City-State-Zip: BEACHWOOD OH 44122

Title SVP  
Name MCGOVERN, ROBERT M  
Address 3300 ENTERPRISE PARKWAY  
City-State-Zip: BEACHWOOD OH 44122

Title SR DIRECTOR OF TAX  
Name EHRENBEIT, APRIL M  
Address 3300 ENTERPRISE PARKWAY  
City-State-Zip: BEACHWOOD OH 44122

Title SVP  
Name FENNERTY, CONOR M  
Address 3300 ENTERPRISE PARKWAY  
City-State-Zip: BEACHWOOD OH 44122

Title VP  
Name BRANIGAN, DANIEL E  
Address 3300 ENTERPRISE PARKWAY  
City-State-Zip: BEACHWOOD OH 44122