

**2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M1400004584

**FILED**  
**Apr 20, 2018**  
**Secretary of State**  
**CC6487462472**

**Entity Name:** BRE DDR BR NATURE COAST FL LLC

**Current Principal Place of Business:**

3300 ENTERPRISE PKWY  
BEACHWOOD, OH 44122

**Current Mailing Address:**

3300 ENTERPRISE PKWY  
BEACHWOOD, OH 44122

**FEI Number:** 47-1782028

**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 PKWY  
City-State-Zip: BEACHWOOD OH 44122

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

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

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

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

Title SVP  
Name SCHULTZ, CRAIG A  
Address 3300 ENTERPRISE PKWY  
City-State-Zip: BEACHWOOD OH 44122

Title VP  
Name DEERING, MICHAEL J  
Address 3300 ENTERPRISE PKWY  
City-State-Zip: BEACHWOOD OH 44122

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

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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:** APRIL M EHRENBEIT

**DIRECTOR OF TAX**

**04/20/2018**

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

\_\_\_\_\_  
Date

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

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

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

Title SVP  
Name KERN, WILLIAM J  
Address 3300 ENTERPRISE PKWY  
City-State-Zip: BEACHWOOD OH 44122

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

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

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

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

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