

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M1500004783

**Entity Name:** FAIRWAY CYPRESS III OWNER, LLC

**Current Principal Place of Business:**

800 N MAGNOLIA AVE STE 1625  
ORLANDO, FL 32803

**Current Mailing Address:**

800 N MAGNOLIA AVE STE 1625  
ORLANDO, FL 32803

**FEI Number:** NOT APPLICABLE

**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           | MGR                         | Title           | AUTHORIZED REPRESENTATIVE      |
| Name            | PG-PKY FAIRWAY JV, LLC      | Name            | HOLMES-KIDD, A. NONI           |
| Address         | 800 N MAGNOLIA AVE STE 1625 | Address         | 800 N MAGNOLIA AVE<br>STE 1625 |
| City-State-Zip: | ORLANDO FL 32803            | City-State-Zip: | ORLANDO FL 32803               |

*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:** A. NONI HOLMES-KIDD

**AUTHORIZED  
REPRESENTATIVE**

**03/23/2024**

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

\_\_\_\_\_  
Date