

**2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M17000003376

**FILED**  
**Apr 09, 2019**  
**Secretary of State**  
**4354644061CC**

**Entity Name:** SHOPCORE PROPERTIES TRS MANAGEMENT LLC

**Current Principal Place of Business:**

C/O SHOPCORE PROPERTIES  
10920 VIA FRONTERA, SUITE 220  
SAN DIEGO, CA 92127

**Current Mailing Address:**

C/O SHOPCORE PROPERTIES  
10920 VIA FRONTERA, SUITE 220  
SAN DIEGO, CA 92127 US

**FEI Number:** 27-4419114

**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 MBR  
Name EXCEL TRS INC.  
Address C/O SHOPCORE PROPERTIES  
10920 VIA FRONTERA, SUITE 220  
City-State-Zip: SAN DIEGO CA 92127

Title PRESIDENT & CEO  
Name PETHERBRIDGE, LUKE  
Address 233 S. WACKER DRIVE  
SUITE 3400  
City-State-Zip: CHICAGO IL 60606

Title CFO, TREASURER & EVP  
Name NAKAGAWA, JAMES Y.  
Address 10920 VIA FRONTERA, SUITE 220  
City-State-Zip: SAN DIEGO CA 92127

Title EVP-ASSET MANAGEMENT  
Name KESSINGER, KEVIN  
Address 233 S. WACKER DRIVE  
SUITE 3400  
City-State-Zip: CHICAGO IL 60606

Title EVP-LEASING AND DEVELOPMENT  
Name DIETERLE, DAVID  
Address 233 S. WACKER DRIVE  
SUITE 3400  
City-State-Zip: CHICAGO IL 60606

Title SVP & GENERAL COUNSEL  
Name MADWAY, LINDA  
Address 50 S. 16TH STREET  
SUITE 3325  
City-State-Zip: PHILADELPHIA PA 19102

Title VP-DEVELOPMENT  
Name DONLEY, BRIAN  
Address 233 S. WACKER DRIVE  
SUITE 3400  
City-State-Zip: CHICAGO IL 60606

Title VP- LEASING  
Name MAGGIO, PETER  
Address 50 S. 16TH STREET  
SUITE 3325  
City-State-Zip: PHILADELPHIA PA 19102

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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:** LINDA MADWAY

SVP

04/09/2019

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

\_\_\_\_\_  
Date

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

Title VP-LEASING  
Name GERVIN, WILLIAM  
Address 10920 VIA FRONTERA, SUITE 220  
City-State-Zip: SAN DIEGO CA 92127

Title AUTHORIZED SIGNATORY  
Name HUTZEL, STEPHEN  
Address 233 S. WACKER DRIVE  
SUITE 3400  
City-State-Zip: CHICAGO IL 60606

Title VP-LEASING, SPECIALTY CENTER  
Name ROGERS, NINA  
Address 50 S. 16TH STREET  
SUITE 3325  
City-State-Zip: PHILADELPHIA PA 19102