## 2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# M1700006373

### Entity Name: HAWTHORNE RESIDENTIAL PARTNERS LLC

### **Current Principal Place of Business:**

806 GREEN VALLEY RD, SUITE 311 GREENSBORO, NC 27408-7076

#### **Current Mailing Address:**

806 GREEN VALLEY RD, SUITE 311 GREENSBORO, NC 27408-7076 US

# FEI Number: 26-4141876

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

NRAI SERVICES, INC. 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US Certificate of Status Desired: No

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

#### Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	ALLISON, D. SHOFFNER	Name	DAVENPORT, SAMANTHA
Address	806 GREEN VALLEY RD, SUITE 311	Address	806 GREEN VALLEY RD, SUITE 311
City-State-Zip:	GREENSBORO NC 27408-7076	City-State-Zip:	GREENSBORO NC 27408-7076
Title	MGR	Title	MGR
Name	HARRINTON, EDWARD M	Name	PAYONK, PHILIP M
Address	806 GREEN VALLEY RD, SUITE 311	Address	806 GREEN VALLEY RD, SUITE 311
City-State-Zip:	GREENSBORO NC 27408-7076	City-State-Zip:	GREENSBORO NC 27408-7076
Title	BROKER		
Name	BIZANZ, THOMAS LEONARD		
Address	2591 DALLAS PARKWAY SUITE 300		
City-State-Zip:	FRISCO TX 75034		

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: SAMANTHA DAVENPORT

PRINCIPAL

03/24/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date

# FILED Mar 24, 2022 Secretary of State 7164152977CC

Date