

2022 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F04000006619

Entity Name: SC (WESTLAND PROMENADE) INC.**Current Principal Place of Business:**302 DATURA STREET, SUITE 100
WEST PALM BEACH, FL 33401**Current Mailing Address:**302 DATURA STREET, SUITE 100
WEST PALM BEACH, FL 33401 US**FEI Number:** 20-1356568**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TSO AGENT SERVICES, LLC
302 DATURA STREET, SUITE 100
WEST PALM BEACH, FL 33401 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**Officer/Director Detail :**

Title VP
Name DEFAZIO, DANIEL
Address 302 DATURA STREET, SUITE 100
City-State-Zip: WEST PALM BEACH FL 33401

Title PRESIDENT
Name KOSOY , BRIAN D
Address 302 DATURA STREET, SUITE 100
City-State-Zip: WEST PALM BEACH FL 33401

Title VP
Name MOROSS, GREGORY S
Address 302 DATURA STREET, SUITE 100
City-State-Zip: WEST PALM BEACH FL 33401

Title VP
Name FRIED, JORDAN
Address 302 DATURA STREET, SUITE 100
City-State-Zip: WEST PALM BEACH FL 33401

Title VP
Name DAKE , BOB
Address 302 DATURA STREET, SUITE 100
City-State-Zip: WEST PALM BEACH FL 33401

Title VP
Name GREEN , ROBERT S
Address 302 DATURA STREET, SUITE 100
City-State-Zip: WEST PALM BEACH FL 33401

Title VP
Name PRESTON , JEFFREY
Address 302 DATURA STREET, SUITE 100
City-State-Zip: WEST PALM BEACH FL 33401

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRIAN D KOSOYPRESIDENT, BY JOHN
DUEMIG, ATTORNEY IN
FACT

04/13/2022

Electronic Signature of Signing Officer/Director Detail_____
Date