

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000014839

**Entity Name:** COACHWOOD COLONY MHP, LLC

**Current Principal Place of Business:**

TWO NORTH RIVERSIDE PLAZA  
SUITE 800  
CHICAGO, IL 60606

**FILED**  
**Apr 17, 2024**  
**Secretary of State**  
**4094380130CC**

**Current Mailing Address:**

TWO NORTH RIVERSIDE PLAZA  
SUITE 800  
CHICAGO, IL 60606 US

**FEI Number: 52-2277345**

**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	CEO, PRESIDENT	Title	EVP, CFO AND TREASURER
Name	NADER, MARGUERITE	Name	SEAVEY, PAUL
Address	TWO NORTH RIVERSIDE PLAZA SUITE 800	Address	TWO NORTH RIVERSIDE PLAZA SUITE 800
City-State-Zip:	CHICAGO IL 60606	City-State-Zip:	CHICAGO IL 60606
Title	SENIOR VICE PRESIDENT	Title	SENIOR VICE PRESIDENT
Name	BUNCE, RONALD	Name	HATTEL, BRETT
Address	TWO NORTH RIVERSIDE PLAZA SUITE 800	Address	TWO NORTH RIVERSIDE PLAZA SUITE 800
City-State-Zip:	CHICAGO IL 60606	City-State-Zip:	CHICAGO IL 60606
Title	SENIOR VICE PRESIDENT	Title	SENIOR VICE PRESIDENT
Name	BUTLER, DONALD EVERRETT II	Name	MARTIN, STANLEY
Address	TWO NORTH RIVERSIDE PLAZA SUITE 800	Address	TWO NORTH RIVERSIDE PLAZA SUITE 800
City-State-Zip:	CHICAGO IL 60606	City-State-Zip:	CHICAGO IL 60606
Title	VP	Title	VP
Name	FORBES, DARRIN	Name	CLEMMY, MONSIE
Address	TWO NORTH RIVERSIDE PLAZA SUITE 800	Address	TWO NORTH RIVERSIDE PLAZA SUITE 800
City-State-Zip:	CHICAGO IL 60606	City-State-Zip:	CHICAGO IL 60606

**Continues on page 2**

*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: DAVID ELDERSVELD**

**EVP, CHIEF LEGAL OFFICER AND CORPORATE SECRETARY**      **04/17/2024**

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

\_\_\_\_\_  
Date

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

Title VP  
Name GREGORY, JOHN  
Address TWO NORTH RIVERSIDE PLAZA  
SUITE 800  
City-State-Zip: CHICAGO IL 60606

Title MEMBER  
Name MHC OPERATING LIMITED PARTNERSHIP  
Address TWO NORTH RIVERSIDE PLAZA  
SUITE 800  
City-State-Zip: CHICAGO IL 60606

Title VP  
Name MERKLE, JONATHAN  
Address TWO NORTH RIVERSIDE PLAZA  
SUITE 800  
City-State-Zip: CHICAGO IL 60606

Title EVP, CHIEF LEGAL OFFICER AND  
CORPORATE SECRETARY  
Name ELDERSVELD, DAVID  
Address TWO NORTH RIVERSIDE PLAZA  
SUITE 800  
City-State-Zip: CHICAGO IL 60606