## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000121352

Entity Name: BCC EAST, LLC

Apr 24, 2024 Secretary of State 9037582665CC

**FILED** 

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

600 NORTHLAKE BLVD.

SUITE 130

ALTAMONTE SPRINGS, FL 32701

## **Current Mailing Address:**

600 NORTHLAKE BLVD.

**SUITE 130** 

ALTAMONTE SPRINGS, FL 32701 US

FEI Number: 20-8394264 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET SUITE 4

TALLAHASSEE, FL 32301 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: PATRICIA FARRELL 04/24/2024

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title MGR Title MGR

Name SCOTTON, NANCY Name MCFADDEN, JEFF K
Address TWO INTERNATIONAL PLACE 27TH Address 600 NORTHLAKE BLVD.

FLOOR SUITE 130

ON SOITE IS

City-State-Zip: BOSTON MA 02110 City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title MGR Title MGR

Name MERRIGAN, PETER A Name RIJBOUNT, ERIK

Address TWO INTERNATIONAL PLACE Address TWO INTERNATIONAL PLACE

27TH FLOOR 27TH FLOOR

City-State-Zip: BOSTON MA 02110 City-State-Zip: BOSTON MA 02110

Title AUTHORIZED REPRESENTATIVE

Name LACKEY, VICTORIA
Address 600 NORTHLAKE BLVD.

**SUITE 130** 

City-State-Zip: ALTAMONTE SPRINGS FL 32701

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: VICTORIA LACKEY

**AUTHORIZED PERSON** 

04/24/2024