2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000011012

Entity Name: GOLDEN OAK DEVELOPMENT, LLC

Current Principal Place of Business:

215 CELEBRATION PLACE SUITE 300

CELEBRATION, FL 34747

Current Mailing Address:

500 S BUENA VISTA ST BURBANK, CA 91521 US

FEI Number: 27-0506308 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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

FILED Apr 30, 2022

Secretary of State

2662156912CC

Authorized Person(s) Detail:

Title MANAGER Title MANAGER

NameSOLOMON, AARON HNameJONES, CHRISTOPHER AAddress1170 CELEBRATION BLVDAddress1375 E BUENA VISTA DRIVECity-State-Zip:CELEBRATION FL 34747City-State-Zip:LAKE BUENA VISTA FL 32830

Title MANAGER Title MANAGER

NameBELZER, GREGORYNameMCGOWAN, JOHN MAddress500 SOUTH BUENA VISTA STREETAddress1375 E BUENA VISTA DRCity-State-Zip:BURBANK CA 91521City-State-Zip:LAKE BUENA VISTA FL 32830

City-State-Zip: BURBANK CA 91521 City-State-Zip: LAKE BUENA VISTA FI

Title MANAGER Title MANAGER

Name GOMEZ, CARLOS A Name GAVAZZI, CHAKIRA H

Address 500 SOUTH BUENA VISTA STREET Address 500 SOUTH BUENA VISTA STREET

City-State-Zip: BURBANK CA 91521 City-State-Zip: BURBANK CA 91521

Title MANAGER Title MANAGER

Name SALAMA, MICHAEL Name PIERCE, PAGE P

Address 500 SOUTH BUENA VISTA STREET Address 215 CELEBRATION PLACE

City-State-Zip: BURBANK CA 91521 City-State-Zip: CELEBRATION FL 34747

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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: CHAKIRA H GAVAZZI MANAGER

Electronic Signature of Signing Authorized Person(s) Detail

04/30/2022 Date

Authorized Person(s) Detail Continued:

Title MANAGER

Name STOWELL, JOHN A
Address 500 S BUENA VISTA ST

City-State-Zip: BURBANK CA 91521

Title MANAGER

Name SCHULTZ, TERRI A

Address 215 CELEBRATION PLACE

City-State-Zip: CELEBRATION FL 34747

Title MANAGER

Name GROSSMAN, DANIEL F Address 500 S BUENA VISTA ST City-State-Zip: BURBANK CA 91521 Title MANAGER

Name STEED, SHANNA L

Address 640 PAULA AVE

City-State-Zip: GLENDALE CA 91201

Title MANAGER

Name YOUNG, LEE R

Address 1170 CELEBRATION BLVD City-State-Zip: CELEBRATION FL 34747