

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000096603

Entity Name: TUMBLIN CREEK GP, LLC**Current Principal Place of Business:**242 INVERNESS CENTER DRIVE
BIRMINGHAM, AL 35242**Current Mailing Address:**242 INVERNESS CENTER DRIVE
BIRMINGHAM, AL 35242 US**FEI Number:** 47-1281071**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LOWITZ, STEPHEN
3521 N 53RD AVE
HOLLYWOOD, FL 33021 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	MGR
Name	LOWITZ, STEPHEN
Address	242 INVERNESS CENTER DRIVE
City-State-Zip:	BIRMINGHAM AL 35242

Title	MGR
Name	EHRENSTEIN, GABE
Address	242 INVERNESS CENTER DRIVE
City-State-Zip:	BIRMINGHAM AL 35242

Title	MGR
Name	SUMRALL, DAVID
Address	242 INVERNESS CENTER DRIVE
City-State-Zip:	BIRMINGHAM AL 35242

Title	MGR
Name	MOORE, JOHN
Address	242 INVERNESS CENTER DRIVE
City-State-Zip:	BIRMINGHAM AL 35242

Title	MGR
Name	JOHNSTON, SAM
Address	242 INVERNESS CENTER DRIVE
City-State-Zip:	BIRMINGHAM AL 35242

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 SUMRALL**MEMBER****03/17/2020**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date