

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000184806

**Entity Name:** REPLACEMENT GP BTV LLC

**Current Principal Place of Business:**

4600 W CYPRESS STREET  
WESTSHORE SQUARE STE 405  
TAMPA, FL 33607

**Current Mailing Address:**

777 WEST PUTNAM AVENUE  
GREENWICH, CT 00830 US

**FEI Number:** 47-2451134

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

COGENCY GLOBAL INC.  
115 NORTH CALHOUN ST.  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MBR  
Name MYERS, BRIAN P  
Address 777 WEST PUTNAM AVENUE  
City-State-Zip: GREENWICH CT 00830

Title SECRETARY  
Name DODGE, GINA  
Address 777 W PUTNAM AVE  
City-State-Zip: GREENWICH CT 06830

Title EVP  
Name SALZMAN, DAVID A  
Address 777 WEST PUTNAM AVENUE  
City-State-Zip: GREENWICH CT 06830

Title TREASURER  
Name HUSSEY, JAMES P  
Address 777 WEST PUTNAM AVENUE  
City-State-Zip: GREENWICH CT 06830

Title ASST. TREASURER  
Name KRAFNICK, CHARLES L  
Address 777 WEST PUTNAM AVENUE  
City-State-Zip: GREENWICH CT 06830

*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:** BRIAN P. MYERS

04/15/2021

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

\_\_\_\_\_  
Date