

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000109343

Entity Name: HHRE SPRING CREEK LLC**Current Principal Place of Business:**5550 W. EXECUTIVE DRIVE, SUITE 550
TAMPA, FL 33609**Current Mailing Address:**5550 W. EXECUTIVE DRIVE, SUITE 550
TAMPA, FL 33609 US**FEI Number:** 85-0830878**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MINOTAKIS, STELIOS
5550N W. EXECUTIVE DRIVE, SUITE 550
TAMPA, FL 33609 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	AR
Name	HARROD, CHADWICK
Address	5550N W. EXECUTIVE DRIVE, SUITE 550
City-State-Zip:	TAMPA FL 33609

Title	AR
Name	WEBSTER, ROBERT C
Address	5550N W. EXECUTIVE DRIVE, SUITE 550
City-State-Zip:	TAMPA FL 33609

Title	AR
Name	BENNETT, PATTI
Address	5550N W. EXECUTIVE DRIVE, SUITE 550
City-State-Zip:	TAMPA FL 33609

Title	AR
Name	KELLEY, JACK
Address	5550N W. EXECUTIVE DRIVE, SUITE 550
City-State-Zip:	TAMPA FL 33609

Title	MGR
Name	HARROD DEVELOPMENT, INC.
Address	5550 W. EXECUTIVE DRIVE, SUITE 550
City-State-Zip:	TAMPA FL 33609

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: CHADWICK HARROD**AUTHORIZED
REPRESENTATIVE****04/18/2022**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date