

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000138454

**FILED**  
**Feb 03, 2025**  
**Secretary of State**  
**2601272864CC**

**Entity Name:** TCD 221 PINELLAS PROPERTY LLC

**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:** 86-3053841

**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

02/03/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title: MANAGER  
Name: MERRIGAN, PETER  
Address: TWO INTERNATIONAL PLACE  
27TH FLOOR  
City-State-Zip: BOSTON MA 02110

Title: MANAGER  
Name: SCOTTON, NANCY  
Address: TWO INTERNATIONAL PLACE  
27TH FLOOR  
City-State-Zip: BOSTON MA 02110

Title: MANAGER  
Name: RIJNBOUT, ERIK  
Address: TWO INTERNATIONAL PLACE  
27TH FLOOR  
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

Title: MANAGER  
Name: MCFADDEN, JEFF  
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**

02/03/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date