

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M0200000442

Entity Name: CCRC NAPLES GOLF LLC

Current Principal Place of Business:

4747 BETHESDA AVENUE
SUITE 1300
BETHESDA, MD 20814-5584

Current Mailing Address:

4747 BETHESDA AVENUE
LAW DEPARTMENT SUITE 1300
BETHESDA, MD 20814-5584 US

FEI Number: 26-3048477

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2699 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 MANAGER/VICE PRESIDENT
Name OTTINGER, JOSEPH CLARENCE
Address 4747 BETHESDA AVENUE, SUITE 1300
 SUITE 1300
City-State-Zip: BETHSEDA MD 20814

Title MANAGER/PRESIDENT
Name TYRRELL, NATHAN S.
Address 4747 BETHESDA AVENUE
 SUITE 1300
City-State-Zip: BETHESDA MD 20814-5584

Title SECRETARY
Name KELSO, WILLIAM KENNETH
Address 4747 BETHESDA AVENUE
 SUITE 1300 - LAW DEPARTMENT
City-State-Zip: BETHESDA MD 20814-5584

Title TREASURER
Name BRAND, RACHEL DEANNE
Address 4747 BETHESDA AVENUE
 SUITE 1300
City-State-Zip: BETHESDA MD 20814-5584

Title VP
Name WERBER, JR., FREDERICK CORNEL
Address 4747 BETHESDA AVENUE
 SUITE 1300
City-State-Zip: BETHESDA MD 20814

Title VP
Name RIED, W. JUSTIN
Address 4747 BETHESDA AVENUE
 SUITE 1300
City-State-Zip: BETHESDA MD 20814-5584

Title VP
Name LENTZ, MICHAEL ERNEST
Address 4747 BETHESDA AVENUE
 SUITE 1300
City-State-Zip: BETHESDA MD 20814

Title VP
Name KAUFMAN, JEFFREY ANDREW
Address 4747 BETHESDA AVENUE
 SUITE 1300
City-State-Zip: BETHESDA MD 20814-5584

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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: JOSEPH CLARENCE OTTINGER

MANAGER

04/30/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title VP
Name GALLAGHER, KEVIN PATRICK
Address 4747 BETHESDA AVENUE
SUITE 1300
City-State-Zip: BETHESDA MD 20814-5584

Title ASST. SECRETARY
Name WARREN, ANNE ADDISON
Address 4747 BETHESDA AVENUE
SUITE 1300
City-State-Zip: BETHESDA MD 20814-5584