

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M02000003089

**Entity Name:** AMB CODINA BEACON LAKES, LLC

**Current Principal Place of Business:**

1800 WAZEE STREET  
SUITE 500  
DENVER, CO 80202

**FILED**  
**Apr 28, 2024**  
**Secretary of State**  
**8747943672CC**

**Current Mailing Address:**

1800 WAZEE STREET  
SUITE 500  
DENVER, CO 80202 US

**FEI Number: 68-0530000**

**Certificate of Status Desired: No**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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	SOLE MEMBER	Title	PRESIDENT, EAST REGION
Name	AMB/IMDH BEACON LAKES, LLC	Name	KITTREDGE, NICK
Address	1800 WAZEE STREET SUITE 500	Address	1800 WAZEE STREET SUITE 500
City-State-Zip:	DENVER CO 80202	City-State-Zip:	DENVER CO 80202
Title	VP	Title	ASSISTANT SECRETARY
Name	DEL RIO, PARIS	Name	POLGAR, JESSICA
Address	1800 WAZEE STREET SUITE 500	Address	1800 WAZEE STREET SUITE 500
City-State-Zip:	DENVER CO 80202	City-State-Zip:	DENVER CO 80202
Title	VP	Title	GENERAL COUNSEL, SECRETARY
Name	DEMARCO, ANNE	Name	NEKRITZ, EDWARD
Address	1800 WAZEE STREET SUITE 500	Address	1800 WAZEE STREET SUITE 500
City-State-Zip:	DENVER CO 80202	City-State-Zip:	DENVER CO 80202
Title	ASSISTANT SECRETARY	Title	SENIOR VICE PRESIDENT
Name	DOERING, HOLLY	Name	HARVEY, TRAVIS
Address	1800 WAZEE STREET SUITE 500	Address	1800 WAZEE STREET SUITE 500
City-State-Zip:	DENVER CO 80202	City-State-Zip:	DENVER CO 80202

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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: MICHAEL T. BLAIR**

**AUTHORIZED PERSON**

**04/28/2024**

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

\_\_\_\_\_  
Date

**Authorized Person(s) Detail Continued :**

Title CFO, TREASURER  
Name ARNDT, TIMOTHY  
Address PIER 1, BAY 1  
City-State-Zip: SAN FRANCISCO CA 94111

Title SENIOR VICE PRESIDENT  
Name GLAZIER, DENVER  
Address 1800 WAZEE STREET  
SUITE 500  
City-State-Zip: DENVER CO 80202

Title VP  
Name GUFFEY, JONATHAN  
Address 1800 WAZEE STREET  
SUITE 500  
City-State-Zip: DENVER CO 80202

Title SENIOR VICE PRESIDENT  
Name SACRO, MICHAEL  
Address 1800 WAZEE STREET  
SUITE 500  
City-State-Zip: DENVER CO 80202

Title SENIOR VICE PRESIDENT  
Name GREGORY, SCOTT  
Address 1800 WAZEE STREET  
SUITE 500  
City-State-Zip: DENVER CO 80202

Title SENIOR VICE PRESIDENT  
Name TENENBAUM, JASON  
Address 1800 WAZEE STREET  
SUITE 500  
City-State-Zip: DENVER CO 80202

Title VP  
Name KLION, JONATHAN  
Address 1800 WAZEE STREET  
SUITE 500  
City-State-Zip: DENVER CO 80202