

**2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M05000004995

**Entity Name:** STONEGATE COMPLEX GP, L.L.C.

**Current Principal Place of Business:**

OFFICE OF THE CORPORATE SECRETARY  
730 THIRD AVENUE MS: 730/12/02  
NEW YORK, NY 10017

**FILED**  
**Apr 22, 2021**  
**Secretary of State**  
**3179239735CC**

**Current Mailing Address:**

ATTN: DENISE OUELLET  
1 HARTFORD PLAZA 19TH FLOOR  
HARTFORD, CT 06103 US

**FEI Number:** 20-3294844

**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           MANAGING MEMBER  
Name           NA PROPERTY FUND HOLDINGS,  
                  L.L.C  
Address       OFFICE OF THE CORPORATE  
                  SECRETARY  
                  730 THIRD AVENUE MS: 730/12/02  
City-State-Zip: NEW YORK NY 10017

Title           SECRETARY  
Name           DAVIS , MARTINA  
Address       730 THIRD AVENUE  
City-State-Zip: NEW YORK NY 10017

Title           AUTHORIZED SIGNER  
Name           ROMAN-BROOKS, OLGA  
Address       1 FINANCIAL PLAZA  
                  STE 1960  
City-State-Zip: HARTFORD CT 06103

Title           AUTHORIZED SIGNER  
Name           TU, LEX  
Address       4675 MACARTHUR CT  
                  STE 1100  
City-State-Zip: NEWPORT BEACH CA 92660

Title           AUTHORIZED SIGNER  
Name           SAYERS, THOMAS  
Address       1 FINANCIAL PLAZA  
                  STE 1960  
City-State-Zip: HARTFORD CT 06103

Title           AUTHORIZED SIGNER  
Name           RICHARD, ALPHIE J.  
Address       1 FINANCIAL PLAZA  
                  STE 1960  
City-State-Zip: HARTFORD CT 06103

Title           AUTHORIZED SIGNER  
Name           BURNIO, CARLOS  
Address       501 BRICKELL KEY DRIVE  
                  STE 504  
City-State-Zip: MIAMI FL 33131

Title           AUTHORIZED SIGNER  
Name           KAVEGE, SERGE  
Address       8500 ANDREW CARNEGIE BLVD  
City-State-Zip: CHARLOTTE NC 28262

**Continues on page 2**

*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:** MARTINA DAVIS

**SECRETARY**

**04/22/2021**

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

\_\_\_\_\_  
Date

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

Title AUTHORIZED SIGNER  
Name CLARK, KATHLEEN  
Address 1 FINANCIAL PLAZA  
STE 1960  
City-State-Zip: HARTFORD CT 06103

Title AUTHORIZED SIGNER  
Name CHOR, MICHAEL  
Address 333 W WACKER DRIVE  
City-State-Zip: CHICAGO IL 60606

Title AUTHORIZED SIGNER  
Name SCHWAAB, MICHAEL  
Address 333 W WACKER DRIVE  
City-State-Zip: CHICAGO IL 60606