## 2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000005777

**Entity Name: BRIXMOR MERGERSUB LLC** 

**Current Principal Place of Business:** 

450 LEXINGTON AVENUE, 13TH FLOOR

NEW YORK, NY 10017

**Current Mailing Address:** 

450 LEXINGTON AVENUE, 13TH FLOOR NEW YORK. NY 10017 US

FEI Number: 20-5657205 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

FILED Apr 27, 2017

**Secretary of State** 

CC5772476035

Authorized Person(s) Detail:

**FLOOR** 

 Title
 AUTHORIZED MEMBER
 Title
 PRESIDENT/CEO

 Name
 BRIXMOR STN LLC
 Name
 TAYLOR, JAMES M.

Address 450 LEXINGTON AVENUE, 13TH Address 450 LEXINGTON AVENUE, 13TH

**FLOOR** 

City-State-Zip: NEW YORK NY 10017 City-State-Zip: NEW YORK NY 10017

TitleEVP/CFO/TREASURERTitleEVP/SECRETARYNameAMAN, ANGELANameSIEGEL, STEVEN

Address 450 LEXINGTON AVENUE, 13TH Address 450 LEXINGTON AVENUE, 13TH

FLOOR FLOOR

City-State-Zip: NEW YORK NY 10017 City-State-Zip: NEW YORK NY 10017

Title EVP Title EVP

Name HORGAN, MARK Name MOSS, MICHAEL

Address 450 LEXINGTON AVENUE, 13TH Address 450 LEXINGTON AVENUE, 13TH

FLOOR FLOOR

City-State-Zip: NEW YORK NY 10017 City-State-Zip: NEW YORK NY 10017

Title EVP Title EVP

Name SINGH, CAROLYN Name FINNEGAN, BRIAN

Address 450 LEXINGTON AVENUE, 13TH Address 450 LEXINGTON AVENUE, 13TH

FLOOR FLOOR

City-State-Zip: NEW YORK NY 10017 City-State-Zip: NEW YORK NY 10017

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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: STEVEN SIEGEL AUTHORIZED PERSON 04/27/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date

## Authorized Person(s) Detail Continued:

Title **EVP** Title

Name LITZLER, THOMAS Name RODENSTEIN, BARRY

450 LEXINGTON AVENUE, 13TH FLOOR Address 450 LEXINGTON AVENUE, 13TH Address **FLOOR** 

NEW YORK NY 10017 City-State-Zip: City-State-Zip: NEW YORK NY 10017

Title EVP

Name VENDER, DAVID

Name BERGER, MATTHEW Address 450 LEXINGTON AVENUE, 13TH FLOOR

Address 450 LEXINGTON AVENUE, 13TH City-State-Zip: NEW YORK NY 10017 **FLOOR** 

Title **EVP** 

Name WOOD, MICHAEL

Name BUCHAKJIAN, HAIG Address 450 LEXINGTON AVENUE, 13TH FLOOR

Address 450 LEXINGTON AVENUE, 13TH City-State-Zip: NEW YORK NY 10017

**FLOOR** 

SVP Title Name

GERSTENHABER, DAVID

Address 450 LEXINGTON AVENUE, 13TH FLOOR Name KAUFMAN, STEVEN

City-State-Zip: NEW YORK NY 10017

Title SVP

Name SLATER, STACY

Address 450 LEXINGTON AVENUE, 13TH FLOOR

NEW YORK NY 10017 City-State-Zip:

**EVP** 

Title

MOORE, KRISTEN Name

Address 450 LEXINGTON AVENUE, 13TH FLOOR

City-State-Zip: NEW YORK NY 10017

SVP Title

Name CREEKMORE, TONYA

450 LEXINGTON AVENUE, 13TH FLOOR Address

NEW YORK NY 10017

City-State-Zip:

Title SVP

Name PIPPIS, JAMES

Address 450 LEXINGTON AVENUE, 13TH FLOOR

City-State-Zip: NEW YORK NY 10017

SVP Title

BENNISON, PATRICK Name

450 LEXINGTON AVENUE, 13TH FLOOR Address

City-State-Zip: NEW YORK NY 10017

City-State-Zip:

Title

Title

NEW YORK NY 10017 City-State-Zip:

**EVP** 

SVP

Title SVP

Address 450 LEXINGTON AVENUE, 13TH

NEW YORK NY 10017

**FLOOR** 

NEW YORK NY 10017 City-State-Zip:

SVP Title

Name STEIN, HELANE

Address 450 LEXINGTON AVENUE, 13TH

**FLOOR** 

NEW YORK NY 10017 City-State-Zip:

Title SVP

GUHEEN, RYAN Name

Address 450 LEXINGTON AVENUE, 13TH

**FLOOR** 

NEW YORK NY 10017 City-State-Zip:

Title SVP

Name WHITE, JASON

450 LEXINGTON AVENUE, 13TH Address

**FLOOR** 

City-State-Zip: NEW YORK NY 10017

Title SVP

Name GALLAGHER, STEVEN

450 LEXINGTON AVENUE, 13TH Address

**FLOOR** 

City-State-Zip: NEW YORK NY 10017