

**2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M10000004041

**Entity Name:** BACK BEACH APARTMENTS - HALE, L.L.C.

**Current Principal Place of Business:**

7020 FAIN PARK DRIVE  
SUITE 5  
MONTGOMERY, AL 36117

**Current Mailing Address:**

P.O. BOX 241402  
MONTGOMERY, AL 36124 US

**FEI Number:** NOT APPLICABLE

**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           MANAGER  
Name           BLANCHARD, JOHN D.  
Address        7020 FAIN PARK DRIVE  
                  SUITE 5  
City-State-Zip: MONTGOMERY AL 36117

Title           MANAGER  
Name           MILLER, SAMUEL L.  
Address        7020 FAIN PARK DRIVE  
                  SUITE 5  
City-State-Zip: MONTGOMERY AL 36117

Title           MANAGER  
Name           HALE, OSCAR H. JR.  
Address        7020 FAIN PARK DRIVE  
                  SUITE 5  
City-State-Zip: MONTGOMERY AL 36117

*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:** JOHN D. BLANCHARD

**AUTHORIZED PERSON**

**04/22/2022**

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

\_\_\_\_\_  
Date