

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M1400007124

Entity Name: T-C THE MANOR LLC

Current Principal Place of Business:

730 THIRD AVENUE
NEW YORK, NY 10017

FILED
May 01, 2024
Secretary of State
7164532923CC

Current Mailing Address:

730 THIRD AVENUE
NEW YORK, NY 10017 US

FEI Number: 47-1992102

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 MEMBER
Name TEACHERS INSURANCE AND ANNUITY ASSOCIATION OF AMERICA
Address 730 THIRD AVENUE
City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED REPRESENTATIVE
Name RAMOS, JANET
Address 730 THIRD AVENUE
City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED REPRESENTATIVE
Name COHEN, DONNA
Address 730 THIRD AVENUE
City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED REPRESENTATIVE
Name CORNUKE , JOHN
Address 730 THIRD AVENUE
City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED REPRESENTATIVE
Name JOSEPH, JILLIAN
Address 730 THIRD AVENUE
City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED REPRESENTATIVE
Name MILLER, NANCY
Address 575 LEXINTON AVE
City-State-Zip: NEW YORK NY 10022

Title AUTHORIZED REPRESENTATIVE
Name MILLER, WILLIAM
Address 730 THIRD AVENUE
City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED REPRESENTATIVE
Name ROLLINS, TODD
Address 730 THIRD AVENUE
City-State-Zip: NEW YORK NY 10017

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: WAYNE AGARD

SECRETARY

05/01/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title AUTHORIZED REPRESENTATIVE
Name WEINDLING, FRANCESCA
Address 730 THIRD AVENUE
City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED SIGNER
Name NAMKOONG, TAEUK
Address 1 FINANCIAL PLAZA
SUITE 1950
City-State-Zip: HARTFORD CT 06103

Title AUTHORIZED REPRESENTATIVE
Name BOAN, RYAN
Address 730 THIRD AVENUE
City-State-Zip: NEW YORK NY 10017

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

Title AUTHORIZED REPRESENTATIVE
Name NEGRON, PATRICIA
Address 730 THIRD AVENUE
12TH FL
City-State-Zip: NEW YORK NY 10017

Title AUTHORIZED SIGNER
Name PFLAUM, LAURY
Address 14055 RIVEREDGE DRIVE
SUITE 320
City-State-Zip: TAMPA FL 33637

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

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

Title AUTHORIZED REPRESENTATIVE
Name CHAPERON, JULIEN
Address 730 THIRD AVENUE
City-State-Zip: NEW YORK NY 10017

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

Title AUTHORIZED REPRESENTATIVE
Name INOA-MONJE, CAROLYN
Address 730 THIRD AVENUE
City-State-Zip: NEW YORK NY 10017