

2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M1800000420

Entity Name: BAY TREE LODGE LLC

Current Principal Place of Business:

143 S RIVER RD
SEWALL'S POINT, FL 34996-6311

Current Mailing Address:

C/O OUTLOOK, INC.
1717 K ST NW SUITE 900
WASHINGTON, DC 20006-5349 US

FEI Number: 82-3869947

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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 AUTHORIZED PERSON
Name KIPLINGER, KNIGHT A.
Address C/O OUTLOOK, INC.
1717 K ST NW SUITE 900
City-State-Zip: WASHINGTON DC 20006-5349

Title AUTHORIZED PERSON
Name WILKES, CORBIN M.
Address C/O OUTLOOK, INC.
1717 K ST NW SUITE 900
City-State-Zip: WASHINGTON DC 20006-5349

Title AUTHORIZED PERSON
Name WINTON, MATTHEW C.
Address C/O OUTLOOK, INC.
1717 K ST NW SUITE 900
City-State-Zip: WASHINGTON DC 20006-5349

Title AUTHORIZED PERSON
Name DAUGHERTY, DAVID M.
Address C/O OUTLOOK, INC.
1717 K ST NW SUITE 900
City-State-Zip: WASHINGTON DC 20006-5349

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: DAVID M. DAUGHERTY

AUTHORIZED PERSON

03/29/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date