

**2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M18000002772

**Entity Name:** 1277 W. PALMETTO PARK, LLC**Current Principal Place of Business:**1100 SPRING ST NW STE 550  
C/O SELIG ENTERPRISES, INC.  
ATLANTA, GA 30309**Current Mailing Address:**1100 SPRING ST NW STE 550  
C/O SELIG ENTERPRISES, INC.  
ATLANTA, GA 30309 US**FEI Number: NOT APPLICABLE****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
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 SENIOR VICE PRESIDENT  
Name CLAYMAN, KENNETH J  
Address 1100 SPRING ST NW STE 550  
City-State-Zip: ATLANTA GA 30309

Title CFO  
Name STEIN, RONALD J  
Address 1100 SPRING ST NW STE 550  
City-State-Zip: ATLANTA GA 30309

Title SVP - CONSTRUCTION  
Name DEAN, BONNIE  
Address 1100 SPRING ST NW STE 550  
City-State-Zip: ATLANTA GA 30309

Title COO  
Name CHITTY, JO ANN  
Address 1100 SPRING ST NW STE 550  
City-State-Zip: ATLANTA GA 30309

Title MANAGER  
Name SELIG ENTERPRISES, INC.  
Address 1100 SPRING STREET NW  
550  
City-State-Zip: ATLANTA GA 30309

Title PRESIDENT  
Name SELIG, S STEPHEN III  
Address 1100 SPRING ST NW  
C/O SELIG ENTERPRISES, INC. SUITE  
550  
City-State-Zip: ATLANTA GA 30309

*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: TIFFANY NEUHOFF****AUTHORIZED PERSON****03/31/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date