

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M21000009229

**Entity Name:** CSIM BEAR LAKE TITLE HOLDER LLC**Current Principal Place of Business:**68 S SERVICE RD  
STE 120  
MELVILLE, NY 117472350**Current Mailing Address:**68 S SERVICE RD  
STE 120  
MELVILLE, NY 117472350 US**FEI Number:** 92-0830617**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COGENCY GLOBAL INC.  
115 N. CALHOUN ST., STE. 4  
TALLAHASSEE, FL 32301 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 MANAGING MEMBER  
Name SERV PROPERTY CORP.  
Address 68 SOUTH SERVICE RD, STE 120  
City-State-Zip: MELVILLE NY 11747

Title VP, ASST. TREASURER AND ASST. SEC  
Name BISNATH , NIGEL  
Address 68 SOUTH SERVICE ROAD SUITE 120  
City-State-Zip: MELVILLE NY 11747

Title VP, ASST TREASURER, ASST SECRETARY  
Name MATARESE , JILL A  
Address 68 SOUTH SERVICE ROAD, SUITE 120  
City-State-Zip: MELVILLE NY 11747

Title VP, ASST. TREASURER AND ASST. SECRETARY  
Name CORRIGAN , KEVIN J.  
Address 68 SOUTH SERVICE ROAD SUITE 120  
City-State-Zip: MELVILLE NY 11747

Title VP, ASST. TREASURER AND SECRETARY  
Name ANGELO , BERNARD J.  
Address 68 SOUTH SERVICE ROAD SUITE 120  
City-State-Zip: MELVILLE NY 11747

Title VP, ASST. TREASURER AND ASST. SECRETARY  
Name O'CONNOR , TIMOTHY  
Address 68 SOUTH SERVICE ROAD SUITE 120  
City-State-Zip: MELVILLE NY 11747

Title PRESIDENT, TREASURER, ASST. SECRETARY  
Name BURNS , KEVIN P.  
Address 68 SOUTH SERVICE ROAD SUITE 120  
City-State-Zip: MELVILLE NY 11747

*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:** JILL A MATARESE

VP

04/11/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date