

**2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M21000009582

**Entity Name:** AMH HB HAMMOCK OAKS VENTURE, LLC**Current Principal Place of Business:**23975 PARK SORRENTO STE 300  
CALABASAS, CA 91302**Current Mailing Address:**23975 PARK SORRENTO STE 300  
CALABASAS, CA 91302 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	MGR
Name	VOGT-LOWELL, SARA
Address	23975 PARK SORRENTO STE 300
City-State-Zip:	CALABASAS CA 91302

Title	MGR
Name	SINGELYN, DAVID
Address	23975 PARK SORRENTO STE 300
City-State-Zip:	CALABASAS CA 91302

Title	VP
Name	EDWARDS, BRAD
Address	23975 PARK SORRENTO STE 300
City-State-Zip:	CALABASAS CA 91302

*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:** SARA VOGT-LOWELL

MANAGER

01/25/2022

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