

**2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M21000009803

**Entity Name:** LJA PROGRAM MANAGEMENT, LLC**Current Principal Place of Business:**7500 RIALTO BLVD, BUILDING II  
SUITE 100  
AUSTIN, TX 78735**Current Mailing Address:**3600 W SAM HOUSTON PKWY S  
SUITE 600  
HOUSTON, TX 77042**FEI Number:** 45-4445384**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REGISTERED AGENTS INC.  
7901 4TH ST N  
STE 300  
ST. PETERSBURG, FL 33702 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	MANAGER
Name	MCKEE, ALAN B
Address	3600 W SAM HOUSTON PKWY S SUITE 600
City-State-Zip:	HOUSTON TX 77042

Title	MANAGER
Name	ROSS, JAMES D
Address	3600 W. SAM HOUSTON PKWY. S, STE. 600
City-State-Zip:	HOUSTON TX 77042

Title	MANAGER
Name	LOWE, THOMAS
Address	2700 LA FRONTERA BLVD., SUITE 150
City-State-Zip:	ROUND ROCK TX 78681

Title	MANAGER
Name	SHACKETT, JOHN D
Address	3600 W SAM HOUSTON PKWY S SUITE 600
City-State-Zip:	HOUSTON TX 77042

*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:** JAMES ROSS

MANAGER

04/21/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date