

**2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M21000017465

**Entity Name:** VINELAND FAMILY GP LLC

**Current Principal Place of Business:**

401 WILSHIRE BLVD  
SUITE 1070  
SANTA MONICA, CA 90401

**Current Mailing Address:**

401 WILSHIRE BLVD  
SUITE 1070  
SANTA MONICA, CA 90401 US

**FEI Number:** 87-4108357

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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	Title	MEMBER
Name	BRONFMAN, JEREMY S	Name	SJB MANAGEMENT LLC
Address	401 WILSHIRE BLVD SUITE 1070	Address	401 WILSHIRE BLVD SUITE 1070
City-State-Zip:	SANTA MONICA CA 90401	City-State-Zip:	SANTA MONICA CA 90401

*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:** HANNA JAMAR

**AUTHORIZED PERSON**

**02/21/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date