

2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M22000011851

Entity Name: FEDERAL REALTY GP LLC**Current Principal Place of Business:**909 ROSE AVE., STE. 200
NORTH BETHESDA, MD 20852**Current Mailing Address:**909 ROSE AVE., STE. 200
NORTH BETHESDA, MD 20852 US**FEI Number:** NOT APPLICABLE**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 ASSISTANT SECRETARY
Name HOUGH, DARLENE
Address 909 ROSE AVENUE, SUITE 200
City-State-Zip: NORTH BETHESDA MD 20852

Title SVP - DEVELOPMENT
Name TSCHIDERER, JOHN
Address 909 ROSE AVENUE, SUITE 200
City-State-Zip: NORTH BETHESDA MD 20852

Title EXEC. VP - CORPORATE
Name BECKER, DAWN
Address 909 ROSE AVENUE, SUITE 200
City-State-Zip: NORTH BETHESDA MD 20852

Title VP - CONSTRUCTION
Name DILLON, PATRICK
Address 909 ROSE AVENUE, SUITE 200
City-State-Zip: NORTH BETHESDA MD 20852

Title EVP - EASTERN REGION PRESIDENT
Name SEHER, WENDY
Address 909 ROSE AVENUE, SUITE 200
City-State-Zip: NORTH BETHESDA MD 20852

Title EXEC VP - CHIEF FINANCIAL
OFFICER AND TREASURER
Name GUGLIELMONE, DANIEL
Address 909 ROSE AVENUE, SUITE 200
City-State-Zip: NORTH BETHESDA MD 20852

Title VP - ASSET MANAGEMENT
Name MELGARD, CHRISTIAN
Address 909 ROSE AVENUE, SUITE 200
City-State-Zip: NORTH BETHESDA MD 20852

Title SVP - DEVELOPMENT
Name MEISER, RAMSEY
Address 909 ROSE AVENUE, SUITE 200
City-State-Zip: NORTH BETHESDA MD 20852

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: DARLENE M HOUGH

ASSISTANT SECRETARY 04/28/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date