

2024 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M22000015980

Entity Name: COCOA LEASED HOUSING ASSOCIATES LP I, LLC

Current Principal Place of Business:

2905 NORTHWEST BOULEVARD
SUITE 150
PLYMOUTH, MN 55441

Current Mailing Address:

2905 NORTHWEST BOULEVARD
SUITE 150
PLYMOUTH, MN 55441 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 MANAGER
Name SWEEN, PAUL R.
Address 2905 NORTHWEST BOULEVARD
 SUITE 150
City-State-Zip: PLYMOUTH MN 55441

Title MANAGER
Name MOORHOUSE, MARK S.
Address 2905 NORTHWEST BOULEVARD
 SUITE 150
City-State-Zip: PLYMOUTH MN 55441

Title MANAGER
Name ANDERSEN, NICHOLAS C.
Address 2905 NORTHWEST BOULEVARD
 SUITE 150
City-State-Zip: PLYMOUTH MN 55441

Title AUTHORIZED REPRESENTATIVE
Name ALLEN, TIMOTHY S
Address 2905 NORTHWEST BOULEVARD
 SUITE 150
City-State-Zip: PLYMOUTH MN 55441

Title AUTHORIZED REPRESENTATIVE
Name LAHNA, D. CHRIS
Address 2905 NORTHWEST BOULEVARD
 SUITE 150
City-State-Zip: PLYMOUTH MN 55441

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: PAUL R. SWEEN

MANAGER

03/20/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date