

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M22000018947

**Entity Name:** 72ANDSUNNY PARTNERS, LLC

**Current Principal Place of Business:**

12101 W. BLUFF CREEK DRIVE  
PLAYA VISTA, CA 90094

**Current Mailing Address:**

12101 W. BLUFF CREEK DRIVE  
PLAYA VISTA, CA 90094 US

**FEI Number:** 27-3705109

**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           BOILER, JOHN  
Address        12101 W. BLUFF CREEK DRIVE  
City-State-Zip: PLAYA VISTA CA 90094

Title           MANAGER  
Name           COLE, GLENN  
Address        12101 W. BLUFF CREEK DRIVE  
City-State-Zip: PLAYA VISTA CA 90094

Title           MANAGER  
Name           JARVIS, MATT  
Address        12101 W. BLUFF CREEK DRIVE  
City-State-Zip: PLAYA VISTA CA 90094

Title           MANAGER  
Name           LANUTO, FRANK  
Address        12101 W. BLUFF CREEK DRIVE  
City-State-Zip: PLAYA VISTA CA 90094

Title           MANAGER  
Name           MCELLIGOTT, PETER  
Address        12101 W. BLUFF CREEK DRIVE  
City-State-Zip: PLAYA VISTA CA 90094

Title           MANAGER  
Name           KIRBY, DAVID  
Address        12101 W. BLUFF CREEK DRIVE  
City-State-Zip: PLAYA VISTA CA 90094

Title           MANAGER  
Name           ROBERTS, SANDY  
Address        12101 W. BLUFF CREEK DRIVE  
City-State-Zip: PLAYA VISTA CA 90094

Title           AUTHORIZED SIGNOR  
Name           KIPPERMAN, ED  
Address        12101 W. BLUFF CREEK DRIVE  
City-State-Zip: PLAYA VISTA CA 90094

*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:** ED KIPPERMAN

**AUTHORIZED SIGNOR**

**04/15/2024**

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

\_\_\_\_\_  
Date