

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M23000003718

Entity Name: CUTLER VISTA HOUSING DEVELOPER, LLC**Current Principal Place of Business:**C/O RELATED COMPANIES
30 HUDSON YARDS, 72ND FLOOR
NEW YORK, NY 10001**Current Mailing Address:**C/O RELATED COMPANIES
30 HUDSON YARDS, 72ND FLOOR
NEW YORK, NY 10001 US**FEI Number:** 92-3523905**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 MANAGING MEMBER
Name THE RELATED COMPANIES, L.P.
Address C/O RELATED COMPANIES
30 HUDSON YARDS, 72ND FLOOR
City-State-Zip: NEW YORK NY 10001

Title AUTHORIZED MEMBER
Name YUKON HOLDINGS, L.L.C.
Address C/O RELATED COMPANIES
30 HUDSON YARDS, 72ND FLOOR
City-State-Zip: NEW YORK NY 10001

Title AUTHORIZED MEMBER
Name BEACHBOX HOLDINGS II, L.L.C.
Address C/O RELATED COMPANIES
30 HUDSON YARDS, 72ND FLOOR
City-State-Zip: NEW YORK NY 10001

Title AUTHORIZED MEMBER
Name SMR HOLDINGS, L.L.C.
Address C/O RELATED COMPANIES
30 HUDSON YARDS, 72ND FLOOR
City-State-Zip: NEW YORK NY 10001

Title AUTHORIZED MEMBER
Name AFFORDABLE HOLDINGS, LLC
Address C/O RELATED COMPANIES
30 HUDSON YARDS, 72ND FLOOR
City-State-Zip: NEW YORK NY 10001

Title AUTHORIZED MEMBER
Name FULL LINE, LLC
Address C/O RELATED COMPANIES
30 HUDSON YARDS, 72ND FLOOR
City-State-Zip: NEW YORK NY 10001

Title AUTHORIZED MEMBER
Name WEDNESDAY HILL LLC
Address C/O RELATED COMPANIES
30 HUDSON YARDS, 72ND FLOOR
City-State-Zip: NEW YORK NY 10001

Title AUTHORIZED MEMBER
Name MINDERBITER HOLDINGS, LLC
Address C/O RELATED COMPANIES
30 HUDSON YARDS, 72ND FLOOR
City-State-Zip: NEW YORK NY 10001

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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: ALEXIS KREMEN**SECRETARY****04/18/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title AUTHORIZED MEMBER
Name JMPFT AFFORDABLE, LLC
Address C/O RELATED COMPANIES
30 HUDSON YARDS, 72ND FLOOR
City-State-Zip: NEW YORK NY 10001

Title AUTHORIZED MEMBER
Name ALLEN FAMILY 2021 TRUST
Address C/O RELATED COMPANIES
30 HUDSON YARDS, 72ND FLOOR
City-State-Zip: NEW YORK NY 10001