2025 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Jul 10, 2025
Secretary of State
6215008036CC

DOCUMENT# M24000016156

Entity Name: GDCB GAINESVILLE PROPCO LLC

Current Principal Place of Business:

7 JACKSON WALKWAY
PROVIDENCE, RI 02903

Current Mailing Address:

7 JACKSON WALKWAY
PROVIDENCE, RI 02903 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	AUTHORIZED PERSON
Name	STOLMEIER, MOLLY
Address	7 JACKSON WALKWAY
City-State-Zip:	PROVIDENCE RI 02903

Title	AUTHORIZED PERSON
Name	LAWRENCE, MATTHEW P.
Address	7 JACKSON WALKWAY
City-State-Zip:	PROVIDENCE RI 02903

Title	AUTHORIZED PERSON
Name	BRODERICK, RUSSELL
Address	7 JACKSON WALKWAY
City-State-Zip:	PROVIDENCE RI 02903

Title	AUTHORIZED PERSON
Name	AREND, TORBEN
Address	7 JACKSON WALKWAY
City-State-Zip:	PROVIDENCE RI 02903

Title	MANAGER
Name	GILBANE DEVELOPMENT COMPANY
Address	7 JACKSON WALKWAY
City-State-Zip:	PROVIDENCE RI 02903

Title	MEMBER
Name	GDCB GAINESVILLE HOLDCO LLC
Address	7 JACKSON WALKWAY
City-State-Zip:	PROVIDENCE RI 02903

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: MOLLY STOLMEIER AUTHORIZED PERSON 07/10/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date