

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000005830

Entity Name: NNN TRS, INC.**Current Principal Place of Business:**450 S. ORANGE AVENUE
SUITE 900
ORLANDO, FL 32801**Current Mailing Address:**450 S. ORANGE AVENUE
SUITE 900
ORLANDO, FL 32801 US**FEI Number:** 59-3672603**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD
#221E
PALM BEACH GARDENS, FL 33410 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**Officer/Director Detail :**

Title DVPT
Name HABICHT, KEVIN B
Address 450 S. ORANGE AVE., SUITE 900
City-State-Zip: ORLANDO FL 32801

Title SEC
Name TESSITORE, CHRISTOPHER P
Address 450 S. ORANGE AVE., SUITE 900
City-State-Zip: ORLANDO FL 32801

Title EVP
Name TESSITORE, CHRISTOPHER P
Address 450 S. ORANGE AVE., SUITE 900
City-State-Zip: ORLANDO FL 32801

Title SVP
Name IANNONE, MICHAEL D
Address 450 S. ORANGE AVENUE
SUITE 900
City-State-Zip: ORLANDO FL 32801

Title DP, CEO
Name WHITEHURST, JULIAN E
Address 450 S. ORANGE AVENUE
SUITE 900
City-State-Zip: ORLANDO FL 32801

Title EVP
Name BAYER, PAUL E
Address 450 S. ORANGE AVE., SUITE 900
City-State-Zip: ORLANDO FL 32801

Title EVP
Name HORN, STEPHEN A JR.
Address 450 S. ORANGE AVENUE
SUITE 900
City-State-Zip: ORLANDO FL 32801

Title EVP
Name MILLER, MICHELLE L
Address 450 S. ORANGE AVENUE
SUITE 900
City-State-Zip: ORLANDO FL 32801

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHRISTOPHER P TESSITORE**SECRETARY****04/08/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date