## ATTACHMENT 16B: TYPE OF DEVELOPER ENTITY – CORPORATION

(Submit pages of the applicable attachment and the Developer Organizational Chart for which information has been provided. Blank pages should not be uploaded in THOMAS.)

NAME OF DEVELOPER ENTITY:

	1	l ama azzzaz p.p.p.a
OFFICERS Name:	DIRECTORS Name:	STOCKHOLDERS Name:
Title:	Address:	Type of Entity:
Address:		State of Formation:
	Telephone No.:	Address:
Telephone No.:		
	Name:	Telephone No.:
Name:	Address:	
Title:	Auuress.	Name:
Address:	Telephone No.:	Type of Entity:
		State of Formation:
Telephone No.:		Address:
	Name:	Address.
Name:	Address:	Telephone No.:
Title:	Address:	Telephone No.:
Address:	Telephone No.:	Name:
		Type of Entity:
Telephone No.:		State of Formation:
		Address:

Telephone No.:

interest in	☐ Check here if no stockholders are listed above because no single stockholder owns a 10% or greater interest in the corporation for which this information is provided.			

2. A.	lim and	ited liability), provide	e all of the following	dentified in 1. above is itself a partnership (limitering information for <u>each</u> general partner of any of ip in 1. (attach additional pages if needed to pro	ficer, directo
	(i)	Name of General Pa	rtner:		
		Address:			
		Telephone: (	)	Ownership:	%
		Type of entity:		□ partnership (complete 3.A.(i) below) complete 3A.(ii) below)	
		State of Formation:		ty company (complete 3.A.(iii) below)	
	(ii)		rtner:		
		Telephone: (		Ownership:	%
		Type of entity:	☐ individual	□ partnership ( <i>complete 3.A.(i) below</i> )	
			□ corporation (a	complete 3A.(ii) below)	
			☐ limited liabili	ty company (complete 3.A.(iii) below)	
		State of Formation:			
	(iii)	Name of General Pa	rtner:		
		Address:			
		Telephone: (	)	Ownership:	%
		Type of entity:	☐ individual	□ partnership (complete 3.A.(i) below)	
			□ corporation (a	complete 3A.(ii) below)	
			☐ limited liabili	ty company (complete 3.A.(iii) below)	
		State of Formation:			

2. B. If any officer, director and/or stockholder identified in 1. above is a corporation, provide all of the following information for <a href="each of the following">each of the following</a>: (i) all officers, (ii) all directors and (iii) all stockholders with a 10% interest or more in each officer, director and/or stockholder identified as a corporation in 1. (complete 3.B.(i) if any officer, director and/or stockholder identified below is a partnership; complete 3.B.(ii) if any officer, director and/or stockholder identified below is a corporation and/or complete 3.B.(iii) if any officer, director, and/or stockholder identified below is a limited liability company). (attach additional pages if needed to provide complete information.)

OFFICERS	DIRECTORS	STOCKHOLDERS
Name:	Name:	Name:
Title:	Address:	Type of Entity:
Address:	Telephone No.:	State of Formation:
Telephone No.:		Address:
	Name:	Telephone No.:
Name:	Address:	
Title:		Name:
Address:	Telephone No.:	Type of Entity:
		State of Formation:
Telephone No.:		Address:
	Name:	
Name:	Address:	Telephone No.:
Title:		
Address:	Telephone No.:	Name:
		Type of Entity:
Telephone No.:		State of Formation:
		Address:
		Telephone No.:
		- Telephone 110
		l l

 $\Box$  Check here if no stockholders are listed above because no single stockholder owns a 10% or greater interest in the corporation for which this information is provided.

2. C. If any officer, director and/or stockholder identified in 1. above is a limited liability company, provide all of the following information for <a href="mailto:each of the following">each of the following</a>: (i) all <a href="mailto:governors/directors">governors/directors</a>, (ii) all <a href="mailto:members">members</a> and (iii) all <a href="mailto:members">members</a> of each officer, director and/or stockholder identified as a limited liability company in 1. (complete 3.C.(i) if any member and/or manager identified below is a partnership; complete 3.C.(ii) if any member and/or manager identified below is a corporation and/or complete 3.C.(iii) if any member and/or manager identified below is a limited liability company">member and/or manager identified below is a limited liability company</a>). (attach additional pages if needed to provide complete information.)

GOVERNORS/DIRECTORS	MEMBERS  Indicate the Managing  Member(s), if any	MANAGERS/OFFICERS Indicate the Chief Manager(s), if any
Name:	Name:	Name:
Address:	Type of Entity:	Type of Entity:
TI I N	State of Formation:	State of Formation:
Telephone No.:	Address:	Address:
Name:	Telephone No.:	Telephone No.:
Address:	Name:	Name:
	Type of Entity:	Type of Entity:
Telephone No.:	State of Formation:	State of Formation:
	Address:	Address:
Name:	Telephone No.:	Telephone No.:
Address:		- Telephone No
	Name:	Name:
Telephone No.:	Type of Entity:	Type of Entity:
	State of Formation:	State of Formation:
	Address:	Address:
	Telephone No.:	Telephone No.:
Indicate if the LLC listed above i	s:   Member Managed  Manager	r Managed 📮 Board

3. A. (i)	pro pai pro	any general partner identified in 2.A. above is itself a partnership (lovide all of the following information for <u>each</u> general partner of the the following information for <u>each</u> general partner of the the following information for <u>each</u> general partner of the the following information in the relevant form based on type of entities are identified. (attach additional pages if needed to prove	any general partner identified as a andividual or a corporation you must of entity, until only individuals and
	a.	Name of General Partner:	
		Address:	
		Telephone: ()	Ownership:%
		Type of entity: $\square$ individual $\square$ partnership $\square$ corporation	☐ limited liability company
		State of Formation:	-
	b.	Name of General Partner:	
		Address:	
		Telephone: ()	Ownership:%
		Type of entity:  individual  partnership  corporation	☐ limited liability company
		State of Formation:	-
	c.	Name of General Partner:	
		Address:	
		Telephone: ()	Ownership:%
		Type of entity:  individual  partnership  corporation	☐ limited liability company
		State of Formation:	_

3. A. (ii) If any general partner identified in 2.A. above is itself a corporation, provide all of the following information for **each of the following**: (i) all officers, (ii) all directors and (iii) all stockholders with a 10% interest or more in each general partner identified as a corporation in 2.A. If any officer, director or stockholder identified below is not an individual or a corporation you must provide additional information, in the relevant form based on type of entity, until only individuals and no entities are identified. (attach additional pages if needed to provide complete information.)

OFFICERS	DIRECTORS	STOCKHOLDERS
Name:	Name:	Name:
Title:	Address:	Type of Entity:
Address:		State of Formation:
Telephone No.:	Telephone No.:	Address:
Name:	Name:	Telephone No.:
Title:	Address:	Name:
Address:	Telephone No.:	Type of Entity:
Telephone No.:		State of Formation:  Address:
Name:	Name:	Address:
Title:	Address:	Telephone No.:
Address:	Telephone No.:	Name:
Telephone No.:		Type of Entity:
		State of Formation:
		Address:
		Telephone No.:

☐ Check here if no stockholders are listed above because no single stockholder owns a 10% or greater interest in the corporation for which this information is provided.

3. A. (iii) If any general partner identified in 2.A. above is itself a limited liability company, provide all of the following information for **each of the following**: (i) all governors/directors, (ii) all members and (iii) all managers/officers of each general partner identified as a limited liability company in 2.A. If any member or manager identified below is not an individual or a corporation you must provide additional information, in the relevant form based on type of entity, until only individuals and no entities are identified. (attach additional pages if needed to provide complete information.)

GOVERNORS/DIRECTORS	MEMBERS	MANAGERS/OFFICERS
	Indicate the Managing	Indicate the Chief Manager(s),
	Member(s), if any	if any
Name:	Name:	Name:
Address:	Type of Entity:	Type of Entity:
Telephone No.:	State of Formation:	State of Formation:
	Address:	Address:
Name:	Telephone No.:	Telephone No.:
Address:	Name:	Name:
Telephone No.:	Type of Entity:	Type of Entity:
	State of Formation:	State of Formation:
	Address:	Address:
Name:		
Address:	Telephone No.:	Telephone No.:
T.11 N.	Name:	Name:
Telephone No.:	Type of Entity:	Type of Entity:
	State of Formation:	State of Formation:
	Address:	Address:
	Telephone No.:	Telephone No.:
Indicate if the LLC listed shove i	s:	
mulcale if the LLC listed above i	s Iviemoci ivianageu - Ivianagei	managou 🖬 Doard

-	a.	Name of General Partner:		_	
		A 11			
		Address:			
		Telephone: ()		Ownership:	%
		Type of entity: ☐ individual ☐ partnership ☐ co	orporation	☐ limited liabili	ity company
		State of Formation:			
t -	b.	Name of General Partner:			
		Address:			
		Telephone: ()_		Ownership:	%
		Type of entity: ☐ individual ☐ partnership company	□ corp	oration 🗖 li	mited liabili
		State of Formation:			
C	c.	Name of General Partner:			
		Address:			
		Telephone: ()_		Ownership:	0/.

3. B. (ii) If any officer, director and/or stockholder identified in 2.B. above is itself a corporation, provide all of the following information for <a href="each of the following">each of the following</a>: (i) all officers, (ii) all directors and (iii) all stockholders with a 10% interest or more in each officer, director and/or stockholder identified as a corporation in 2.B. If any officer, director or stockholder identified below is not an individual or a corporation you must provide additional information, in the relevant form based on type of entity, until only individuals and no entities are identified. (attach additional pages if needed to provide complete information.)

OFFICERS	DIRECTORS	STOCKHOLDERS
Name:	Name:	Name:
Title:	Address:	Type of Entity:
Address:		State of Formation:
	Telephone No.:	Address:
Telephone No.:		
Name:	Name:	Telephone No.:
Title:	Address:	Name:
Address:	Telephone No.:	Type of Entity:
		State of Formation:
Telephone No.:		Address:
Name:	Name:	
Title:	Address:	Telephone No.:
Address:	Telephone No.:	Name:
		Type of Entity:
Telephone No.:		State of Formation:
		Address:
		Telephone No.:

☐ Check here if no stockholders are listed above because no single stockholder owns a 10% or greater interest in the corporation for which this information is provided.

3. B. (iii) If any officer, director and/or stockholder identified in 2.B. above is itself a limited liability company, provide all of the following information for <a href="each of the following">each of the following</a>: (i) all <a href="governors/directors">governors/directors</a>, (ii) all <a href="mailto:members">members</a> and (iii) <a href="mailto:managers/officers">managers/officers</a> of each officer, director and/or stockholder identified as a limited liability company in 2.B. If any member or manager identified below is not an individual or a corporation you must provide additional information, in the relevant form based on type of entity, until only individuals and no entities are identified. (attach additional pages if needed to provide complete information.)

GOVERNORS/DIRECTORS	MEMBERS Indicate the Managing	MANAGERS/OFFICERS Indicate the chief Manager(s),
	Member(s), if any	If any
Name:	Name:	Name:
Address:	Type of Entity:	Type of Entity:
TILLY	State of Formation:	State of Formation:
Telephone No.:	Address:	Address:
Name:	Telephone No.:	Telephone No.:
Address:	Name:	Name:
	Type of Entity:	Type of Entity:
Telephone No.:	State of Formation:	State of Formation:
	Address:	Address:
Name:	Telephone No.:	Telephone No.:
Address:		- Cicphone No
T. I. I. N.	Name:	Name:
Telephone No.:	Type of Entity:	Type of Entity:
	State of Formation:	State of Formation:
	Address:	Address:
	Telephone No.:	Telephone No.:
		_
Indicate if the LLC listed above i	s:   Member Managed  Manager	Managed   Board

	Name of General Partner:	
	Address:	
	Telephone: ()	Ownership:%
	Type of entity: ☐ individual ☐ partnership ☐ corporation	☐ limited liability compan
	State of Formation:	-
	Name of General Partner:	
	Address:	
	Telephone: ()	Ownership:%
	Type of entity: ☐ individual ☐ partnership ☐ corporation	☐ limited liability compan
	State of Formation:	-
•	Name of General Partner:	
	Address:	
	Telephone: ()	Ownership:%

If any member and/or manager identified in 2.C. above is itself a partnership (limited,

3. C. (i)

3. C. (ii) If any member and/or manager identified in 2.C. above is itself a corporation, provide all of the following information for <a href="mailto:each of the following">each of the following</a>: (i) all officers, (ii) all directors and (iii) <a href="mailto:stockholders with a 10%">stockholders with a 10%</a> interest or more in each member and/or manager identified as a corporation in 2.C. If any officer, director or stockholder identified below is not an individual or a corporation you must provide additional information, in the relevant form based on type of entity, until only individuals and no entities are identified. (attach additional pages if needed to provide complete information.)

OFFICERS	DIRECTORS	STOCKHOLDERS
Name:	Name:	Name:
Title:	Address:	Type of Entity:
Address:	Telephone No.:	State of Formation:
Telephone No.:	Telephone No.:	Address:
	Name:	Telephone No.:
Name:	Address:	
Title:		Name:
Address:	Telephone No.:	Type of Entity:
		State of Formation:
Telephone No.:		Address:
Name:	Name:	
Title:	Address:	Telephone No.:
Address:	Telephone No.:	Name:
		Type of Entity:
Telephone No.:		State of Formation:
		Address:
		Telephone No.:

<sup>☐</sup> Check here if no stockholders are listed above because no single stockholder owns a 10% or greater interest in the corporation for which this information is provided.

3. C. (iii) If any member and/or manager identified in 2.C. above is itself a limited liability company, provide all of the following information for <u>each of the following</u>: (i) <u>all governors/directors</u>, (ii) <u>all members</u> and (iii) <u>all managers/officers</u> of each member and/or manager identified as a limited liability company in 2.C. If any member or manager identified below is not an individual or a corporation you must provide additional information, in the relevant form based on type of entity, until only individuals and no entities are identified. (attach additional pages if needed to provide complete information.)

GOVERNORS/DIRECTORS	MEMBERS	MANAGERS/OFFICERS
	Indicate the Managing	Indicate the Chief Manager(s),
	Member(s), if any	if any
Name:	Name:	Name:
Address:	Type of Entity:	Type of Entity:
	State of Formation:	State of Formation:
Telephone No.:	Address:	Address:
Name:	Telephone No.:	Telephone No.:
Address:	Name:	Name:
	Type of Entity:	Type of Entity:
Telephone No.:	State of Formation:	State of Formation:
	Address:	Address:
Name:		
Address:	Telephone No.:	Telephone No.:
	Name:	Name:
Telephone No.:	Type of Entity:	Type of Entity:
	State of Formation:	State of Formation:
	Address:	Address:
	Telephone No.:	Telephone No.:
Indicate if the LLC listed above i	s:   Member Managed  Manager	Managed □ Board