

**ATTACHMENT 16C: TYPE OF DEVELOPER ENTITY –
LIMITED LIABILITY COMPANY**

**(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. Provide all of the following information for **each of the following**: (i) all governors/directors, (ii) all members and (iii) all managers/officers of the Developer Entity (*complete 2.A. if any member and/or manager identified below is a partnership; complete 2.B. if any member and/or manager identified below is a corporation and/or complete 2.C. if any member and/or manager identified below is a limited liability company. (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: _____ Address: _____ Telephone No.: _____ | Name: _____ Type of Entity: _____ State of Formation: _____ Address: _____ Telephone No.: _____ | Name: _____ Type of Entity: _____ State of Formation: _____ Address: _____ Telephone No.: _____ |
| Name: _____ Address: _____ Telephone No.: _____ | Name: _____ Type of Entity: _____ State of Formation: _____ Address: _____ Telephone No.: _____ | Name: _____ Type of Entity: _____ State of Formation: _____ Address: _____ Telephone No.: _____ |
| Name: _____ Address: _____ Telephone No.: _____ | Name: _____ Type of Entity: _____ State of Formation: _____ Address: _____ Telephone No.: _____ | Name: _____ Type of Entity: _____ State of Formation: _____ Address: _____ Telephone No.: _____ |

Indicate if the LLC listed above is: Member Managed Manager Managed Board

2. A. If any member and/or manager identified in 1. above is itself a partnership (limited, general, or limited liability), provide all of the following information for **each general partner** of any member and/or manager identified as a partnership in 1. (*attach additional pages if needed to provide complete information.*)

(i) Name of General Partner: _____

Address: _____

Telephone: (_____) _____ Ownership: _____%

Type of entity: individual partnership (*complete 3.A.(i) below*)

corporation (*complete 3.A.(ii) below*)

limited liability company (*complete 3.A.(iii) below*)

State of Formation: _____

(ii) Name of General Partner: _____

Address: _____

Telephone: (_____) _____ Ownership: _____%

Type of entity: individual partnership (*complete 3.A.(i) below*)

corporation (*complete 3.A.(ii) below*)

limited liability company (*complete 3.A.(iii) below*)

State of Formation: _____

(iii) Name of General Partner: _____

Address: _____

Telephone: (_____) _____ Ownership: _____%

Type of entity: individual partnership (*complete 3.A.(i) below*)

corporation (*complete 3.A.(ii) below*)

limited liability company (*complete 3.A.(iii) below*)

State of Formation: _____

2. B. If any member and/or manager identified in 1. 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 member and/or manager 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

Name:

Title:

Address:

Telephone No.:

Name:

Title:

Address:

Telephone No.:

Name:

Title:

Address:

Telephone No.:

DIRECTORS

Name:

Address:

Telephone No.:

Name:

Address:

Telephone No.:

Name:

Address:

Telephone No.:

STOCKHOLDERS

Name:

Type of Entity:

State of Formation:

Address:

Telephone No.:

Name:

Type of Entity:

State of Formation:

Address:

Telephone No.:

Name:

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.

2. C. If any member and/or manager identified in 1. 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 member and/or manager identified below 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*). (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: _____ Address: _____ Telephone No.: _____ | Name: _____ Type of Entity: _____ State of Formation: _____ Address: _____ Telephone No.: _____ | Name: _____ Type of Entity: _____ State of Formation: _____ Address: _____ Telephone No.: _____ |
| Name: _____ Address: _____ Telephone No.: _____ | Name: _____ Type of Entity: _____ State of Formation: _____ Address: _____ Telephone No.: _____ | Name: _____ Type of Entity: _____ State of Formation: _____ Address: _____ Telephone No.: _____ |
| Name: _____ Address: _____ Telephone No.: _____ | Name: _____ Type of Entity: _____ State of Formation: _____ Address: _____ Telephone No.: _____ | Name: _____ Type of Entity: _____ State of Formation: _____ Address: _____ Telephone No.: _____ |

Indicate if the LLC listed above is: Member Managed Manager Managed Board

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

a. Name of General Partner: _____

Address: _____

Telephone: (_____) _____ Ownership: _____%

Type of entity: individual partnership 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 any 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 the type of entity, until only individuals and no entities are identified. (*attach additional pages if needed to provide complete information.*)

OFFICERS

Name:

Title:

Address:

Telephone No.:

Name:

Title:

Address:

Telephone No.:

Name:

Title:

Address:

Telephone No.:

DIRECTORS

Name:

Address:

Telephone No.:

Name:

Address:

Telephone No.:

Name:

Address:

Telephone No.:

STOCKHOLDERS

Name:

Type of Entity:

State of Formation:

Address:

Telephone No.:

Name:

Type of Entity:

State of Formation:

Address:

Telephone No.:

Name:

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 any 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 the 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 Member(s), if any | MANAGERS/OFFICERS Indicate the Chief Manager(s), if any |
|---|---|---|
| Name: <hr/> Address: <hr/> <hr/> Telephone No.: <hr/> | Name: <hr/> Type of Entity: <hr/> State of Formation: <hr/> Address: <hr/> <hr/> Telephone No.: <hr/> | Name: <hr/> Type of Entity: <hr/> State of Formation: <hr/> Address: <hr/> <hr/> Telephone No.: <hr/> |
| Name: <hr/> Address: <hr/> <hr/> Telephone No.: <hr/> | Name: <hr/> Type of Entity: <hr/> State of Formation: <hr/> Address: <hr/> <hr/> Telephone No.: <hr/> | Name: <hr/> Type of Entity: <hr/> State of Formation: <hr/> Address: <hr/> <hr/> Telephone No.: <hr/> |
| Name: <hr/> Address: <hr/> <hr/> Telephone No.: <hr/> | Name: <hr/> Type of Entity: <hr/> State of Formation: <hr/> Address: <hr/> <hr/> Telephone No.: <hr/> | Name: <hr/> Type of Entity: <hr/> State of Formation: <hr/> Address: <hr/> <hr/> Telephone No.: <hr/> |
| Name: <hr/> Address: <hr/> <hr/> Telephone No.: <hr/> | Name: <hr/> Type of Entity: <hr/> State of Formation: <hr/> Address: <hr/> <hr/> Telephone No.: <hr/> | Name: <hr/> Type of Entity: <hr/> State of Formation: <hr/> Address: <hr/> <hr/> Telephone No.: <hr/> |

Indicate if the LLC listed above is: Member Managed Manager Managed Board

3. B. (i) If any officer, director and/or stockholder identified in 2.B. above is itself a partnership (limited, general, or limited liability), provide all of the following information for **each general partner** of any officer, director and/or stockholder identified as a partnership in 2.B. If any general partner identified below is not an individual or a corporation you must provide additional information, in the relevant form based on the type of entity, until only individuals and no entities are identified. (*attach additional pages if needed to provide complete information.*)

a. Name of General Partner: _____

Address: _____

Telephone: (_____) _____ Ownership: _____ %

Type of entity: individual partnership 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. 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 **each of the following**: (i) all officers, (ii) all directors and (iii) all stockholders with a 10% interest or more in any 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 the type of entity, until only individuals and no entities are identified. (*attach additional pages if needed to provide complete information.*)

| OFFICERS | DIRECTORS | STOCKHOLDERS |
|--|---|---|
| Name: _____ Title: _____ Address: _____ Telephone No.: _____ | Name: _____ Address: _____ Telephone No.: _____ | Name: _____ Type of Entity: _____ State of Formation: _____ Address: _____ Telephone No.: _____ |
| Name: _____ Title: _____ Address: _____ Telephone No.: _____ | Name: _____ Address: _____ Telephone No.: _____ | Name: _____ Type of Entity: _____ State of Formation: _____ Address: _____ Telephone No.: _____ |
| Name: _____ Title: _____ Address: _____ Telephone No.: _____ | Name: _____ Address: _____ Telephone No.: _____ | Name: _____ 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. 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 **each of the following**: (i) all governors/directors, (ii) all members and (iii) all managers/officers of any officer, director and/or stockholder identified as a limited liability company identified 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 the 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 Member(s), if any | MANAGERS/OFFICERS Indicate the Chief Manager(s), If any |
|--|--|--|
| Name: _____ Address: _____ _____ Telephone No.: _____ | Name: _____ Type of Entity: _____ State of Formation: _____ Address: _____ _____ Telephone No.: _____ | Name: _____ Type of Entity: _____ State of Formation: _____ Address: _____ _____ Telephone No.: _____ |
| Name: _____ Address: _____ _____ Telephone No.: _____ | Name: _____ Type of Entity: _____ State of Formation: _____ Address: _____ _____ Telephone No.: _____ | Name: _____ Type of Entity: _____ State of Formation: _____ Address: _____ _____ Telephone No.: _____ |
| Name: _____ Address: _____ _____ Telephone No.: _____ | Name: _____ Type of Entity: _____ State of Formation: _____ Address: _____ _____ Telephone No.: _____ | Name: _____ Type of Entity: _____ State of Formation: _____ Address: _____ _____ Telephone No.: _____ |

Indicate if the LLC listed above is: Member Managed Manager Managed Board

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

a. Name of General Partner: _____

Address: _____

Telephone: (_____) _____ Ownership: _____%

Type of entity: individual partnership 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. C. (ii) If any member and/or manager identified in 2.C. 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 any 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 the type of entity, until only individuals and no entities are identified. (*attach additional pages if needed to provide complete information.*)

| OFFICERS | DIRECTORS | STOCKHOLDERS |
|--|---|---|
| Name: _____ Title: _____ Address: _____ Telephone No.: _____ | Name: _____ Address: _____ Telephone No.: _____ | Name: _____ Type of Entity: _____ State of Formation: _____ Address: _____ Telephone No.: _____ |
| Name: _____ Title: _____ Address: _____ Telephone No.: _____ | Name: _____ Address: _____ Telephone No.: _____ | Name: _____ Type of Entity: _____ State of Formation: _____ Address: _____ Telephone No.: _____ |
| Name: _____ Title: _____ Address: _____ Telephone No.: _____ | Name: _____ Address: _____ Telephone No.: _____ | Name: _____ 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. 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 **each of the following**: (i) all governors/directors, (ii) all members and (iii) all managers/officers of any 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 the 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 Member(s), if any | MANAGERS/OFFICERS Indicate the Chief Manager(s), if any |
|---|---|---|
| Name: <hr/> Address: <hr/> <hr/> Telephone No.: <hr/> | Name: <hr/> Type of Entity: <hr/> State of Formation: <hr/> Address: <hr/> <hr/> Telephone No.: <hr/> | Name: <hr/> Type of Entity: <hr/> State of Formation: <hr/> Address: <hr/> <hr/> Telephone No.: <hr/> |
| Name: <hr/> Address: <hr/> <hr/> Telephone No.: <hr/> | Name: <hr/> Type of Entity: <hr/> State of Formation: <hr/> Address: <hr/> <hr/> Telephone No.: <hr/> | Name: <hr/> Type of Entity: <hr/> State of Formation: <hr/> Address: <hr/> <hr/> Telephone No.: <hr/> |
| Name: <hr/> Address: <hr/> <hr/> Telephone No.: <hr/> | Name: <hr/> Type of Entity: <hr/> State of Formation: <hr/> Address: <hr/> <hr/> Telephone No.: <hr/> | Name: <hr/> Type of Entity: <hr/> State of Formation: <hr/> Address: <hr/> <hr/> Telephone No.: <hr/> |

Indicate if the LLC listed above is: Member Managed Manager Managed Board