

## LIMITED LIABILITY COMPANY ANNUAL REPORT

NAME OF LIMITED LIABILITY COMPANY:	Grosvenor Land	LLC	
SECRETARY OF STATE ID NUMBER: 2079	454 STATE	E OF FORMATION: NC	Filing Office Use Only E - Filed Annual Report 2079454
REPORT FOR THE CALENDAR YEAR: 20	25		CA202500300911 1/3/2025 11:17
SECTION A: REGISTERED AGENT'S INFORM	<u>MATION</u>		Changes
1. NAME OF REGISTERED AGENT: W	ebster, Colin , Mr.	•	
2. SIGNATURE OF THE NEW REGISTER	A Transfer No. 1995 Sept. 10 S	GNATURE CONSTITUTES CONSENT TO THE	APPOINTMENT
3. REGISTERED AGENT OFFICE STREET	T ADDRESS & COUNTY	4. REGISTERED AGENT OFFICE	MAILING ADDRESS
540 SW Broad Street		540 SW Broad Street	
Southern Pines, NC 28387 Moore County		Southern Pines, NC 28387	
SECTION B: PRINCIPAL OFFICE INFORMATI  1. DESCRIPTION OF NATURE OF BUSIN		opment	
2. PRINCIPAL OFFICE PHONE NUMBER: (919) 688-7361		3. PRINCIPAL OFFICE EMAIL: Privacy Redaction	
4. PRINCIPAL OFFICE STREET ADDRESS		5. PRINCIPAL OFFICE MAILING ADDRESS	
540 SW Broad Street		540 SW Broad Street	
Southern Pines, NC 28387		Southern Pines, NC 28387	
6. Select one of the following if applied  The company is a veteran-or  The company is a service-diagram.	wned small business		
SECTION C: COMPANY OFFICIALS (Enter ad	ditional company officials	s in Section E.)	
NAME: Colin S Webster	NAME: Neal L Le	wis NAME:	
TITLE: Chief Executive Officer	TITLE: Chief Finan	cial Officer TITLE:	
ADDRESS:	ADDRESS:	ADDRESS:	
140 S Lakeshore Dr	429 Kendall Dr.		
Whispering Pines, NC 28327	Southern Pines, N		
SECTION D: <u>CERTIFICATION OF ANNUAL</u>	REPORT. Section D mu	ust be completed in its entirety by a p	erson/business entity.
Neal L Lewis SIGNATURE		1/3/2025 DATE	
Form must be signed by a Company Official listed under	r Section C of This form.	DA	_
Neal L Lewis  Print or Type Name of Company Official		Chief Financial Officer  Print or Type Title of Company Official	
r fill or Type Name of Con	ipany Omolai	r mit of Type Tide o	Company Omorai

This Annual Report has been filed electronically.

Print or Type Title of Company Official