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. Provide all of the following information for <u>each of the following</u>: (i) <u>all officers</u>, (ii) <u>all directors</u> and (iii) <u>all stockholders with a 10% interest or more</u> in the corporation that is the Developer Entity (complete 2.A. below if any officer, director and/or stockholder is a partnership; complete 2.B. below if any officer, director and/or stockholder is a corporation and/or complete 2.C. below if any officer, director and/or stockholder 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: | | State of Formation: |
| | Telephone No.: | Address: |
| Telephone No.: | | |
| Name: | Name: | Telephone No.: |
| Title: | Address: | Name: |
| | | |
| Address: | Telephone No.: | Type of Entity: |
| Telephone No.: | | State of Formation: |
| Telephone No.: | | Address: |
| Name: | Name: | |
| Title: | Address: | Telephone No.: |
| Address: | | Name: |
| | Telephone No.: | Type of Entity: |
| Telephone No.: | | State of Formation: |
| | | Address: |
| | | Telephone No.: |
| | | |

| the corporation for win | ockholders are listed about this information is pro | ovided. | | |
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| ` ' | Name of General Pa | rtner: | |
|-------|---------------------|--|---|
| | Address: | | |
| | Telephone: (| Ownership: | % |
| | Type of entity: | ☐ individual ☐ partnership (complete 3.A.(i) below) ☐ corporation (complete 3A.(ii) below) | |
| | State of Formation: | ☐ limited liability company (complete 3.A.(iii) below) | |
| (ii) | Name of General Pa | rtner: | |
| | Address: | | |
| | Telephone: (| Ownership: | % |
| | Type of entity: | ☐ individual ☐ partnership (complete 3.A.(i) below) | |
| | | □ corporation (complete 3A.(ii) below) | |
| | | ☐ limited liability company (complete 3.A.(iii) below) | |
| | State of Formation: | | |
| (iii) | Name of General Pa | rtner: | |
| | Address: | | |
| | Telephone: (| Ownership: | % |
| | T | ☐ individual ☐ partnership (complete 3.A.(i) below) | |
| | Type of entity: | | |

2. B. If any officer, director and/or stockholder identified in 1. above is 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 officer, director and/or stockholder identified as a corporation in 1. (complete 3.B.(ii) 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: |
| Telephone No.: | | |
| Name: | Name: | Telephone No.: |
| Title: | Address: | Name: |
| Tiuc. | | |
| Address: | Telephone No.: | Type of Entity: |
| | | State of Formation: |
| Telephone No.: | | Address: |
| | Name: | Address: |
| Name: | Address: | Telephone No.: |
| Title: | | |
| 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.

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 each of the following: (i) all governors/directors, (ii) all members and (iii) all managers/officers 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). (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: |
| | 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.: |
| | s: □ Member Managed □ Manager | |

| 3. A. (1) | pro par pro | by general partner identified in 2.A. above is itself a partnership (by ovide all of the following information for each general partner of entership in 2.A. If any general partner identified below is not an envide additional information, in the relevant form based on type entities are identified. (attach additional pages if needed to prove | f any general partner identified as a individual or a corporation you must of entity, until only individuals and |
|-----------|-------------------|---|--|
| | 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 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.: | 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: |
| T. L L NI | | Type of Entity: |
| Telephone No.: | | State of Formation: |
| | | Address: |
| | | Telephone No.: |
| | | |

 \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.

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 <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 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 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: |
| 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: |
| - Telephone 140 | State of Formation: | State of Formation: |
| | Address: | Address: |
| Name: | | |
| Address: | Telephone No.: | 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 is | s: Member Managed Manager | Managed □ Board |

| 3. B (i) | or dir nor on | ny officer, director and/or stockholder identified in 2.B. above is itself a partnership (limited, general limited liability), provide all of the following information for each general partner of each officer, ector and/or stockholder identified as a partnership in 2.B. If any general partner identified below is an individual or a corporation you must provide additional information, in the relevant form based type of entity, until only individuals and no entities are identified. (attach additional pages if needed 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: (| | | |
| | | 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 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 each of the following: (i) all governors/directors, (ii) all members and (iii) managers/officers 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: |
| | 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: 🗍 Memher Managed 🗍 Manager | Managed □ Board |
| marcare in the LLC librar above i | | |

| 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 ea member and/or manager identified as a partnership in 2.C. If any general partner identified below not an individual or a corporation you must provide additional information, in the relevant form base on 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: () | | | |
| | | Type of entity: □ individual □ partnership □ corporation | | | |
| | | State of Formation: | | | |
| | c. | Name of General Partner: | | | |
| | | Address: | | | |
| | | Telephone: () | Ownership:% | | |
| | | Type of entity: \square individual \square partnership \square 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) stockholders with a 10% 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: | | 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. 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 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: |
| | 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: | | — — — — — — — — — — — — — — — — — — — |
| | 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 | |