

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000099543

**FILED**  
**Mar 09, 2016**  
**Secretary of State**  
**CC5583005852**

**Entity Name:** HTG VERANDA SENIOR GP, LLC

**Current Principal Place of Business:**

3225 AVIATION AVE.  
602  
COCONUT GROVE, FL 33133

**Current Mailing Address:**

3225 AVIATION AVE.  
602  
COCONUT GROVE, FL 33133 US

**FEI Number:** 26-2094461

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MATTHEW RIEGER, P.A.  
3225 AVIATION AVENUE  
602  
COCONUT GROVE, FL 33133 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

**Authorized Person(s) Detail :**

Title MGRM  
Name HTG KONOVER, LLC  
Address 3225 AVIATION AVENUE, STE. 602  
City-State-Zip: COCONUT GROVE FL 33133

Title P  
Name RIEGER, RANDY  
Address 3225 AVIATION AVENUE, STE. 602  
City-State-Zip: COCONUT GROVE FL 33133

Title VPS  
Name RIEGER, MATTHEW  
Address 3225 AVIATION AVENUE, STE. 602  
City-State-Zip: COCONUT GROVE FL 33133

Title VP  
Name COHEN, ED  
Address 431 FAIRWAY DRIVE  
City-State-Zip: DEERFIELD BEACH FL 33441

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MATTHEW RIEGER

VPS

03/09/2016

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date