

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000116495

**FILED**  
**Feb 04, 2012**  
**Secretary of State**

**Entity Name:** FOXO LLC

**Current Principal Place of Business:**

22 OXWOOD CIRCLE  
MADISON, WI 53717 US

**New Principal Place of Business:**

**Current Mailing Address:**

22 OXWOOD CIRCLE  
MADISON, WI 53717 US

**New Mailing Address:**

**FEI Number:** 90-0769127

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SANTANGELO, CARL G  
101 NE 3RD AVENUE  
SUITE 1800  
FORT LAUDERDALE, FL 33301 US

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

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

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** PIERCE, SALLY S  
**Address:** 22 OXWOOD CIRCLE  
**City-St-Zip:** MADISON, WI 53717 US

**Title:** MGRM  
**Name:** SIELOFF, JEFFERY M  
**Address:** 4 MASSACHUSETTS AVENUE  
**City-St-Zip:** NORFOLK, MA 02056 US

**Title:** MGRM  
**Name:** LIND, MARY B  
**Address:** 7390 RIVER PINES TRAIL  
**City-St-Zip:** BRIGHTON, MI 48116 US

I hereby certify that the information indicated on this 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 608, Florida Statutes.

**SIGNATURE:** JEFFREY SIELOFF

MR

02/04/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date