

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000006676

FILED  
Apr 26, 2012  
Secretary of State

Entity Name: CANGRO HOLDING, LLC

## Current Principal Place of Business:

5200 TOWN CENTER CIRCLE, SUITE 600  
BOCA RATON, FL 33486

## New Principal Place of Business:

5200 TOWN CENTER CIRCLE  
SUITE 600  
BOCA RATON, FL 33486 US

## Current Mailing Address:

5200 TOWN CENTER CIRCLE, SUITE 600  
BOCA RATON, FL 33486

## New Mailing Address:

5200 TOWN CENTER CIRCLE  
SUITE 600  
BOCA RATON, FL 33486 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: MVP  
Name: METZ, CHRIS  
Address: 5200 TOWN CENTER CIRCLE, SUITE 600  
City-St-Zip: BOCA RATON, FL 33486 US

Title: VAS  
Name: MCCONVERY, MICHAEL J  
Address: 5200 TOWN CENTER CIRCLE, SUITE 600  
City-St-Zip: BOCA RATON, FL 33486 US

Title: VAS  
Name: HAJDUCH, MARK  
Address: 5200 TOWN CENTER CIRCLE, SUITE 600  
City-St-Zip: BOCA RATON, FL 33486 US

Title: VAS  
Name: KLAFTER, MELISSA  
Address: 5200 TOWN CENTER CIRCLE, SUITE 600  
City-St-Zip: BOCA RATON, FL 33486 US

Title: VAS  
Name: EDWARDS, SCOTT  
Address: 5200 TOWN CENTER CIRCLE, SUITE 600  
City-St-Zip: BOCA RATON, FL 33486 US

Title: V  
Name: NEIMARK, JASON  
Address: 5200 TOWN CENTER CIRCLE, SUITE 600  
City-St-Zip: BOCA RATON, FL 33486 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: LAURA LOUIS

POA

04/26/2012

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