

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000066240

**Entity Name:** TRG MEMBER, LLC

**Current Principal Place of Business:**

477 SOUTH ROSEMARY AVENUE  
SUITE 301  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

477 SOUTH ROSEMARY AVENUE  
SUITE 301  
WEST PALM BEACH, FL 33401

**FEI Number:** 20-1600602

**Certificate of Status Desired:** No

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

NATIONAL CORPORATE RESEARCH,LTD.,INC.  
115 NORTH CALHOUN ST.  
SUITE 4  
TALLAHASSEE, FL 32301 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:** LUCY ROSE

03/08/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title P  
Name MILLER, KRISTIN M  
Address 340 PEMBERWICK ROAD  
City-State-Zip: GREENWICH CT 06831

Title VP  
Name SALZMAN, DAVID  
Address 340 PEMBERWICK ROAD  
City-State-Zip: GREENWICH CT 06831

Title VP  
Name FABBRI, WILLIAM T  
Address 477 SOUTH ROSEMARY AVENUE  
SUITE 301  
City-State-Zip: WEST PALM BEACH FL 33401

Title S  
Name DODGE, GINA K  
Address 340 PEMBERWICK ROAD  
City-State-Zip: GREENWICH CT 06831

Title T  
Name DANIELS, MAYA  
Address 4350 W. CYPRESS STREET  
SUITE 340  
City-State-Zip: TAMPA FL 33607

Title MGR  
Name RICHMAN, RICHARD P  
Address 340 PEMBERWICK ROAD  
City-State-Zip: GREENWICH CT 06831

*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:** KRISTIN MILLER

03/08/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date