2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
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Secretary of State
CC7757296582

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Entity Name: ODYSSEY MANAGEMENT VI, LLC

Current Principal Place of Business:

500 SOUTH FLORIDA AVENUE
SUITE 700
LAKELAND, FL 33801

Current Mailing Address:

500 SOUTH FLORIDA AVENUE
SUITE 700
LAKELAND, FL 33801 US

FEI Number: 20-8400872

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PETER A MCFARLANE PA
500 SOUTH FLORIDA AVENUE
SUITE 700
LAKELAND, FL 33801 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	PCEO	Title	VP
Name	MADDEN, ROBERT L	Name	DROST, WILLIAM D
Address	500 SOUTH FLORIDA AVENUE, SUITE 700	Address	500 SOUTH FLORIDA AVENUE, SUITE 700
City-State-Zip:	LAKELAND FL 33801	City-State-Zip:	LAKELAND FL 33801
Title	VCFO	Title	S
Name	FALK, BENJAMIN D	Name	EBDRUP, BRIDGET
Address	500 S FLORIDA AVE STE 700	Address	500 S FLORIDA AVENUE SUITE 700
City-State-Zip:	LAKELAND FL 33801	City-State-Zip:	LAKELAND FL 33801
Title	AT		
Name	KELLEY, KIM S		
Address	500 S FLORIDA AVENUE SUITE 700		
City-State-Zip:	LAKELAND FL 33801		

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: KIM S KELLEY AT 04/28/2014

Electronic Signature of Signing Authorized Person(s) Detail — Date