

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000047714

**Entity Name:** TRG MEMBER OF FL I, LLC

**Current Principal Place of Business:**

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

**Current Mailing Address:**

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

**FEI Number:** 30-0626819

**Certificate of Status Desired:** No

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

NATIONAL CORPORATE RESEARCH, LTD., INC.  
155 OFFICE PLAZA DRIVE  
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

03/25/2014

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

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

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

Title            T  
Name            COLE, DOREEN  
Address        340 PEMBERWICK ROAD  
City-State-Zip: GREENWICH CT 06831

Title            S  
Name            DODGE, GINA K  
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 M. MILLER

**PRESIDENT**

03/25/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date