

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F16000000294

**Entity Name:** SCVNGR, INC.**Current Principal Place of Business:**1 FEDERAL STREET  
FLOOR 6  
BOSTON, MA 02110**Current Mailing Address:**1 FEDERAL STREET  
FLOOR 6  
BOSTON, MA 02110 US**FEI Number:** 26-3799041**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.  
11380 PROPERSITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 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

**Officer/Director Detail :**

Title C, P  
Name PRIEBATSCH, SETH  
Address 1 FEDERAL STREET  
FLOOR 6  
City-State-Zip: BOSTON MA 02110

Title D  
Name BELL, PETER  
Address 1 FEDERAL STREET  
FLOOR 6  
City-State-Zip: BOSTON MA 02110

Title T  
Name LEONARD, LANG  
Address 1 FEDERAL STREET  
FLOOR 6  
City-State-Zip: BOSTON MA 02110

Title DIRECTOR  
Name ZWANZINGER, RON  
Address 1 FEDERAL STREET  
FLOOR 6  
City-State-Zip: BOSTON MA 02110

Title D  
Name MINER, RICH  
Address 1 FEDERAL STREET  
FLOOR 6  
City-State-Zip: BOSTON MA 02110

Title S  
Name CARROLL, BRIAN  
Address 1 FEDERAL STREET  
FLOOR 6  
City-State-Zip: BOSTON MA 02110

Title DIRECTOR  
Name MALONEY, BARRY  
Address 1 FEDERAL STREET  
FLOOR 6  
City-State-Zip: BOSTON MA 02110

Title DIRECTOR  
Name UMPHREY, BILL  
Address 1 FEDERAL STREET  
FLOOR 6  
City-State-Zip: BOSTON MA 02110

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*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BRIAN CARROLL**SECRETARY****04/10/2017**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name PURCELL, PHIL  
Address 1 FEDERAL STREET  
FLOOR 6  
City-State-Zip: BOSTON MA 02110

Title OFFICER  
Name DOROBEEK, CHRISTINA  
Address 1 FEDERAL STREET  
FLOOR 6  
City-State-Zip: BOSTON MA 02110

Title OFFICER  
Name HAGAN, MICHAEL  
Address 1 FEDERAL STREET  
FLOOR 6  
City-State-Zip: BOSTON MA 02110

Title DIRECTOR  
Name ROBERTS, JEN  
Address 1 FEDERAL STREET  
FLOOR 6  
City-State-Zip: BOSTON MA 02110

Title OFFICER  
Name PROKOP, HARALD  
Address 1 FEDERAL STREET  
FLOOR 6  
City-State-Zip: BOSTON MA 02110

Title OFFICER  
Name BOCH, ANDREW  
Address 1 FEDERAL STREET  
FLOOR 6  
City-State-Zip: BOSTON MA 02110