No. W 81818		Due no later than Feb 28, 2013		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		C T CORPORATION SYSTEM			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. MANAGEMENT COMPENSATION GROUP/SOUTHEAST, LLC (THE) DARLENE HRANKAJ C/O NFP, 500 W. MADISON STREET SUITE 2400 CHICAGO IL 60661		921 S ORCHARD ST STE G BOISE ID 83705 USA 3. New Registered Agent Signature:*			
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	BRETT SCHNEIDER		340 MADISON AVENUE 20TH FLOOR	NEW YORK	NY	USA	10173
MANAGER	AGER MALIKA S. HINKSON		340 MADISON AVENUE 20TH FLOOR	NEW YORK	NY	USA	10173
MANAGER MATTHEW P. ANDERSEN		1250 CAPITAL OF TEXAS HWY S BUILDING 2	AUSTIN	TX	USA	78746	
5. Organized Under the Laws of: 6		6. Annual Report must be signed.*					
GA W 81818		Signature: Brett Schneider		Date: 02/22/2013			
		Name (type or pri	Title: Manager				
Processed 02/22/2013	}	* Electronically provid	ed signatures are accepted as original sign	natures.			