2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000004901

Entity Name: HARVEST MANAGEMENT SUB TRS CORP.

Current Principal Place of Business:

5885 MEADOWS RD., SUITE 500 ATTN: LEGAL DEPARTMENT LAKE OSWEGO, OR 97035

Current Mailing Address:

PO BOX 1700 ATTN: LEGAL DEPARTMENT LAKE OSWEGO, OR 97035-8646 US

FEI Number: 45-3864272

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

Officer/Director Detail :

Title	DIR.	Title	DIR.
Name	NARDONE, RANDALL	Name	BROOKS, DAVID N
Address	1345 AVENUE OF THE AMERICAS 46TH FLOOR	Address	1345 AVENUE OF THE AMERICAS 46TH FLOOR
City-State-Zip:	NEW YORK NY 10105	City-State-Zip:	NEW YORK NY 10105
Title	DIR.	Title	DIR.
Name	ASHLEY, JONATHAN	Name	MORRISSEY, JOHN
Address	1345 AVENUE OF THE AMERICAS 46TH FLOOR	Address	1345 AVENUE OF THE AMERICAS 46TH FLOOR
City-State-Zip:	NEW YORK NY 10105	City-State-Zip:	NEW YORK NY 10105
Title	CEO	Title	SEC
Name	CALLISON, JACK RJR	Name	WOOD, RANDY S
Address	5885 MEADOWS RD., SUITE 500	Address	5885 MEADOWS RD., SUITE 500
City-State-Zip:	LAKE OSWEGO OR 97035	City-State-Zip:	LAKE OSWEGO OR 97035

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: RANDY S WOOD

SECRETARY

01/14/2013

Electronic Signature of Signing Officer/Director Detail

FILED Jan 14, 2013 Secretary of State CC7619305424

Certificate of Status Desired: No

Date