

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722735

Entity Name: MYAKKA RIVER GROUP, INC.**Current Principal Place of Business:**7030 CHANCELLOR BLVD.
NORTH PORT, FL 34287**Current Mailing Address:**7030 CHANCELLOR BLVD.
NORTH PORT, FL 34287 US**FEI Number:** 59-1458960**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**SOUDER, JOHN S
6978 PAN AMERICAN BLVD
NORTH PORT, FL 34287-2172 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:** JOHN SOUDER

05/13/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name SOUDER, JOHN S
Address 6978 PAN AMERICAN BLVD
City-State-Zip: NORTH PORT FL 34287-2172

Title VP
Name ALLISON, PAUL
Address 8640 QUINN AVE
City-State-Zip: NORTH PORT FL 34288-2184

Title SECRETARY
Name CAROLEO, THERESA
Address 358 PARANARICO ST.
City-State-Zip: PUNTA GORDA FL 33983

Title TRUSTEE
Name O'GRADY, RETA
Address 18416 MORRISON AVE
City-State-Zip: PORT CHARLOTTE FL 33948-3428

Title TRUSTEE
Name O'GRADY, BERNIE
Address 18416 MORRISON AVE
City-State-Zip: PORT CHARLOTTE FL 33948-3428

Title TRUSTEE
Name WARREN, GEORGE
Address 6733 PAN AMERICAN BLVD
City-State-Zip: NORTH PORT FL 34287

Title OTHER
Name SAVOIE, JOHN PAUL
Address 4215 SANDUNE AVE
City-State-Zip: NORTH PORT FL 34287-3936

Title TRUSTEE
Name ARNDT, EDWARD
Address 20415 CALDER AVE.
City-State-Zip: PORT CHARLOTTE FL 33954

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN S.SOUDER

PRESIDENT

05/13/2020

Electronic Signature of Signing Officer/Director Detail

Date