#### DOCUMENT# 749983

### Entity Name: SPANISH RIVER RESORT & BEACH CLUB ASSOCIATION, INC.

# **Current Principal Place of Business:**

1001 E. ATLANTIC AVE SUITE 202 DELRAY BEACH, FL 33483

### **Current Mailing Address:**

1000 MARKET STREET BLDG. ONE PORTSMOUTH, NH 03801

### FEI Number: 59-1961794

### Name and Address of Current Registered Agent:

CRITCHFIELD, RICHARD 1001 E. ATLANTIC AVE. SUITE 201 DELRAY BEACH, FL 33483 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           | PT                              | Title           | V                               |
|--|-----------------|---------------------------------|-----------------|---------------------------------|
|  | Name            | MACMURRAIN, THOMAS              | Name            | BERGER, ANDREW                  |
|  | Address         | 1001 E. ATLANTIC AVE, SUITE 202 | Address         | 1001 E. ATLANTIC AVE, SUITE 202 |
|  | City-State-Zip: | DELRAY BEACH FL 33483           | City-State-Zip: | DELRAY BEACH FL 33483           |
|  |                 |                                 |                 |                                 |
|  | Title           | S                               | Title           | EVP                             |
|  | Name            | CRITCHFIELD, RICHARD            | Name            | ADE, RICHARD C                  |
|  | Address         | 1001 E. ATLANTIC AVE SUITE 201  | Address         | 1000 MARKET STREET              |
|  | City State 7in. | DELRAY BEACH FL 33483           | City-State-Zip: | PORTSMOUTH NH 03801             |
|  | City-State-Zip: | DELKAT DEACH FL 33403           |                 |                                 |

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.

EVP

## SIGNATURE: RICHARD C. ADE

Electronic Signature of Signing Officer/Director Detail

# FILED Feb 19, 2016 Secretary of State CC5932647291

Certificate of Status Desired: No

Date