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.

PRESIDENT

### SIGNATURE: DAVID NEGIP

Electronic Signature of Signing Officer/Director Detail

# DOCUMENT# N05000010235

Entity Name: RIVER STRAND GOLF & COUNTRY CLUB, INC.

#### **Current Principal Place of Business:**

C/O ICON MANAGEMENT SERVICES 5284 PAYLOR LANE SARASOTA, FL 34240

### **Current Mailing Address:**

C/O ICON MANAGEMENT SERVICES 5284 PAYLOR LANE SARASOTA, FL 34240 US

## FEI Number: 20-3650619

### Name and Address of Current Registered Agent:

ICON MANAGEMENT SERVICES, INC. 5284 PAYLOR LANE SARASOTA, FL 34240 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	E DENNIS K COLLETTI		04/26/2016	
	Electronic Signature of Registered Agent		Date	
Officer/Director Detail :				
Title	PD	Title	VD	
Name	NEGIP, DAVID	Name	LYONS, TERRY	
Address	10481 SIX MILE CYPRESS PKWY	Address	C/O ICON MANAGEMENT SERVICES	
City-State-Zip:	FORT MYERS FL 33966		5284 PAYLOR LANE	
		City-State-Zip:	SARASOTA FL 34240	
Title	STD			
Name	ELLIS, LANCE			
Address	10481 SIX MILE CYPRESS PKWY			
City-State-Zip:	FORT MYERS FL 33966			

FILED Apr 26, 2016 Secretary of State CC1472123513

Certificate of Status Desired: No

04/26/2016 Date