

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010389

Entity Name: RIVERS COALITION DEFENSE FUND, INC.**Current Principal Place of Business:**759 SW FEDERAL HIGHWAY
SUITE 106
STUART, FL 34994**Current Mailing Address:**759 SW FEDERAL HIGHWAY
SUITE 106
STUART, FL 34994**FEI Number:** 20-3734891**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CRARY, LAWRENCE E
759 SW FEDERAL HIGHWAY
SUITE 106
STUART, FL 34994 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_____
Date**Officer/Director Detail :**

| | |
|-----------------|--------------------|
| Title | DIRECTOR |
| Name | KARL, WICKSTROM |
| Address | 2700 S. KANNER HWY |
| City-State-Zip: | STUART FL 34994 |

| | |
|-----------------|------------------|
| Title | TREASURER |
| Name | GUY, WILLIAM EJR |
| Address | 643 SW FUGE RD |
| City-State-Zip: | STUART FL 34997 |

| | |
|-----------------|----------------------------|
| Title | DIRECTOR |
| Name | PERRY, MARK |
| Address | 5062 SW SUNSHINE FARMS WAY |
| City-State-Zip: | PALM CITY FL 34990 |

| | |
|-----------------|-------------------------|
| Title | DIRECTOR |
| Name | WEISSING, CHRISTOPHER T |
| Address | 1381 SW EAGLE NEST WAY |
| City-State-Zip: | PALM CITY FL 34990 |

| | |
|-----------------|------------------------------|
| Title | PRESIDENT |
| Name | CHARLES, GRANDE |
| Address | 9950 SOUTH OCEAN DRIVE, #705 |
| City-State-Zip: | JENSEN BEACH FL 34957 |

| | |
|-----------------|-------------------------|
| Title | DIRECTOR |
| Name | CONNER, MIKE |
| Address | 6490 SW LAKE CIRCLE DR. |
| City-State-Zip: | STUART FL 34997 |

| | |
|-----------------|-------------------------------|
| Title | VP |
| Name | HINKLE JR, KENNETH |
| Address | 5127 SE MARINER GARDEN CIRCLE |
| City-State-Zip: | STUART FL 34997 |

| | |
|-----------------|----------------------------|
| Title | DIRECTOR |
| Name | BRAND, DARRELL |
| Address | 2392 SW ISLAND CREEK TRAIL |
| City-State-Zip: | PALM CITY FL 34990 |

Continues on page 2

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: DARRELL BRAND**DIRECTOR****08/18/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

| | |
|-----------------|----------------------|
| Title | DIRECTOR |
| Name | MARONEY, CHRISTOPHER |
| Address | 1369 SE WHITICAR WAY |
| City-State-Zip: | STUART FL 34997 |