

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L71678

Entity Name: SORRENTO VALLEY GOLF, INC.

Current Principal Place of Business:

% ROBIN L. MCCOY
1995 CALUSA LAKES BLVD.
NOKOMIS, FL 34275

Current Mailing Address:

% ROBIN L. MCCOY
1995 CALUSA LAKES BLVD.
NOKOMIS, FL 34275

FEI Number: 59-3026339

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCCOY, ROBIN LPT
2045 TIMUCUA TR.
NOKOMIS, FL 34275 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	VP	Title	PT
Name	SIMS, SUSAN R	Name	MCCOY, ROBIN LPT
Address	1414 COLONY PLACE.	Address	2045 TIMUCUA TR.
City-State-Zip:	VENICE FL 34292	City-State-Zip:	NOKOMIS FL 34275
Title	VPS	Title	VP
Name	BOBBETT, RONALD M VPS	Name	ILER, DOUGLAS VP
Address	5125 WILLOW LEAF DR.	Address	1808 ABERDEEN RD.
City-State-Zip:	SARASOTA FL 34241	City-State-Zip:	LOUISVILLE KY 40257
Title	AS		
Name	MATUSZAK, DAVID WAS		
Address	2702 HEATHER PL.		
City-State-Zip:	SARASOTA FL 34235		

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: CAPRI ISLES GOLF, INC ROBIN L. MCCOY

LPT

03/29/2019

Electronic Signature of Signing Officer/Director Detail

Date