SUNSET ON T SANIBEL ISLA	HE GULF ND, FL 33957-1515			
Current Mai	ling Address:			
BOX 1515 SANIBEL IS	LAND, FL 33957-1515			
FEI Number: 65-0402354		Certificate of Status Desired: Yes		
Name and A	Address of Current Registered Agent:			
	USO, SCULLION & KNOX E PARKWAY SUITE 302			
The above name	d entity submits this statement for the purpose of changing its regis	stered office or regis	tered agent, or both, in the State of Florida	
	d entity submits this statement for the purpose of changing its regis CHARLES KNOX	stered office or regis		4/07/2016
		stered office or regis		
	Electronic Signature of Registered Agent	stered office or regis		4/07/2016
SIGNATUR	Electronic Signature of Registered Agent	stered office or regis		4/07/2016
SIGNATURE Officer/Dire	E: CHARLES KNOX Electronic Signature of Registered Agent Ctor Detail :		0	4/07/2016
SIGNATURE Officer/Dire	Electronic Signature of Registered Agent Ctor Detail : D	Title	D	4/07/2016
SIGNATURE Officer/Dire Title Name	Electronic Signature of Registered Agent Ctor Detail : D WOLANIN, VINCENT M SUNSET ON THE GULF	Title Name	D WOLANIN, VICTORIA J SUNSET ON THE GULF	4/07/2016
SIGNATURE Officer/Dire Title Name Address	Electronic Signature of Registered Agent Ctor Detail : D WOLANIN, VINCENT M SUNSET ON THE GULF	Title Name Address	D WOLANIN, VICTORIA J SUNSET ON THE GULF	4/07/2016
SIGNATURE Officer/Dire Title Name Address City-State-Zip:	Electronic Signature of Registered Agent Ctor Detail : D WOLANIN, VINCENT M SUNSET ON THE GULF SANIBEL ISLAND FL 33957-1515	Title Name Address	D WOLANIN, VICTORIA J SUNSET ON THE GULF	4/07/2016
SIGNATURE Officer/Dire Title Name Address City-State-Zip: Title	E CHARLES KNOX Electronic Signature of Registered Agent Ctor Detail : D WOLANIN, VINCENT M SUNSET ON THE GULF SANIBEL ISLAND FL 33957-1515 D	Title Name Address	D WOLANIN, VICTORIA J SUNSET ON THE GULF	4/07/2016

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: VINCENT M. WOLANIN

D

04/07/2016

FILED Apr 07, 2016 Secretary of State CC7611347022

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000022845

Entity Name: TOPNOTCH ENTERTAINMENT CORP.

Current Principal Place of Business:

Date