

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003363

Entity Name: RDA STERLING HOLDINGS CORPORATION**Current Principal Place of Business:**1300 RIVERPLACE BLVD
STE 300
JACKSONVILLE, FL 32207**Current Mailing Address:**1300 RIVERPLACE BLVD, STE 300
JACKSONVILLE, FL 32207**FEI Number:** 51-0489972**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	CEOD
Name	SCHILLINGER, JEFFREY
Address	300 S. PARK RD, STE 400
City-State-Zip:	HOLLYWOOD FL 33021

Title	PD
Name	SCHILLINGER, DAVID MD
Address	300 S. PARK RD, STE 400
City-State-Zip:	HOLLYWOOD FL 33021

Title	S
Name	GRECO-DESPARS, SUSAN
Address	300 S. PARK RD, STE 400
City-State-Zip:	HOLLYWOOD FL 33021

Title	VPAS
Name	CRASS, SARAH C.H.
Address	1300 RIVERPLACE BLVD, STE 300
City-State-Zip:	JACKSONVILLE FL 32207

Title	DIRECTOR
Name	SHEEHAN, TIMOTHY D
Address	131 SOUTH DEARBORN STREET #2800
City-State-Zip:	CHICAGO IL 60603

Title	DIRECTOR
Name	MOERSCHEL, GREGORY A
Address	131 SOUTH DEARBORN STREET #2800
City-State-Zip:	CHICAGO IL 60603

Title	DIRECTOR
Name	MAGAS, PETER N
Address	131 SOUTH DEARBORN STREET #2800
City-State-Zip:	CHICAGO IL 60603

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: SARAH C.H. CRASS

VICE PRESIDENT

04/21/2014

Electronic Signature of Signing Officer/Director Detail

Date