708877

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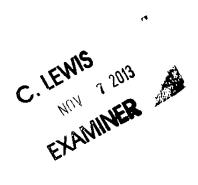


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13 NOV -5 AMII: 04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVES AND FILED



COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: 7 RIVERS GOLF & COUNTRY CLUB, INC.

Name of Corporation

DOCUMENT NUMBER:

708877

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Donald F. Perrin, Esq.

Name of Contact Person

DONALD F. PERRIN, P.A.

Firm/Company

Post Office Box 250

Address

Inverness, FL 34451-0250

City/State and Zip Code

marion7rivers@tampabay.rr.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Donald F. Perrin, Esq.

, 352 726 - 6767

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Sange is submitted for a corporation organized under the laws of the State of \underline{F} or to change its registered office or registered agent, or both, in the State of Fig.	lorida	
1. The name of t	the corporation: 7 RIVERS GOLF & COUNTRY CLUB, INC.		
2. The principal	office address: 7395 W. Pinebrook Street, Crystal River, FL	34429	
3. The mailing a	address (if different): Post Office Box 1146, Crystal River, FL	34423	
4. Date of incorp	poration/qualification: 05/03/1965 Document number: 708877	7	
5. The name and	d street address of the current registered agent and registered office on file wit		
•	7 RIVERS GOLF & COUNTRY CLUB		
	7395 W. Pinebrook Street		
	Crystal River, FL 34429	TAE 3	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered offi	13 NOV -5 SECRETARY FALLAHASSI	
	DONALD F. PERRIN, Esq.		
	320 U.S. Highway 41 South	AMII: OL OF STAIS ES, FLORID	
	P.O. Box NOT acceptable Inverness, FL 34450	DE F	
The street addre	ess of its registered office and the street address of the business office of its be identical.	registered agent,	
Such change wa	as authorized by resolution duly adopted by its board of directors or by an o		
William Signatur	William R. Tripp, Preside		
I hereby accept I further agree to performance of agent. Or if thi hereby confirm	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and comply with the provisions of all statutes relative to the proper and comply duties, and I am familiar with and accept the obligation of my position is document is being filed merely to reflect a change in the registered office that the corporation has been notified in writing of this change.	olete as registered address, I	
	half of an entity:		
Typed or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

* * * FILING FEE: \$35.00 * * *