2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#753105

FILED Mar 06, 2012 Secretary of State

New Principal Place of Business:

Entity Name: SCOTSDALE RECREATION ASSOCIATION, INC.

Current Principal Place of Business:

AMERI-TECH REALITY AMERI-TECH REALTY

24701 US HIGHWAY 19 N SUITE #102 24701 US HIGHWAY 19 N SUITE #102

CLEARWATER, FL 33763 US CLEARWATER, FL 33763 US

Current Mailing Address: New Mailing Address:

AMERI-TECH REALITY AMERI-TECH REALTY

24701 US HIGHWAY 19 N SUITE #102 24701 US HIGHWAY 19 N SUITE #102 CLEARWATER, FL 33763 US CLEARWATER, FL 33763 US

FEI Number: 59-1702720 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

AMERI-TECH REALITY INC.
24701 US HIGHWAY 19 N SUITE #102

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24701 US HIGHWAY 19 N SUITE #102

CLEARWATER, FL 33763 US CLEARWATER, FL 33763 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: AMERI-TECH REALTY INC 03/06/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: PRIESTER, THOMAS
Address: 381 BERWICK CT. #1614
City-St-Zip: DUNEDIN, FL 34698

Title: VPD

Name: EVANS, CHUCK

Address: 1201 MONTROSE PLACE City-St-Zip: DUNEDIN, FL 34698

Title: TD

Name: VIGER, LEO
Address: 1104 TARRIDON CT
City-St-Zip: DUNEDIN, FL 34698

Title: DIR

Name: KNOPKA, BOB

Address: 462 EXMOOR TERRACE City-St-Zip: DUNEDIN, FL 34698

Title: DIR

 Name:
 NUTILE, EDNA

 Address:
 369 DURHAM CT

 City-St-Zip:
 DUNEDIN, FL 34698

Title: DIR

Name: VENHERM, CAROL
Address: 1276 STONEHAVEN LN
City-St-Zip: DUNEDIN, FL 34698

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: THOMAS PRIESTER PD 03/06/2012