2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2012
Secretary of State

DOCUMENT# L71678

Entity Name: SORRENTO VALLEY GOLF, INC.

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

FEI Number: 59-3026339 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCCOY, ROBIN L PT
2045 TIMUCUA TR.
NOKOMIS, FL 34275 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: VP
Name: RICH, THOMAS J VP
Address: 5125 WILLOW LEAF DRIVE
City-St-Zip: SARASOTA, FL 34241

Title: PT
Name: MCCOY, ROBIN L PT
Address: 2045 TIMUCUA TR.
City-St-Zip: NOKOMIS, FL 34275

Title: VPS
Name: BOBBETT, RONALD M VPS
Address: 5125 WILLOW LEAF DR.
City-St-Zip: SARASOTA, FL 34241

Title: VP
Name: ILER, DOUGLAS VP
Address: 1808 ABERDEEN RD.
City-St-Zip: LOUISVILLE, KY 40257

Title: AS
Name: MATUSZAK, DAVID W AS
Address: 2702 HEATHER PL.
City-St-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: ROBIN L. MCCOY PT 02/06/2012

Electronic Signature of Signing Officer or Director — Date