

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007535

FILED
Apr 30, 2009
Secretary of State

Entity Name: THE RIVERWOOD GOLF EXPLORATORY GROUP, INC.

Current Principal Place of Business:

13372 GOLF POINTE DR.
PORT CHARLOTTE, FL 33953

New Principal Place of Business:

Current Mailing Address:

13372 GOLF POINTE DR.
PORT CHARLOTTE, FL 33953

New Mailing Address:

13372 GOLF POINTE DRIVE
PORT CHARLOTTE, FL 33953

FEI Number: 26-3238247

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STANLEY, JOHN F.
13372 GOLF POINTE DR.
PORT CHARLOTTE, FL 33953 US

Name and Address of New Registered Agent:

STANLEY, JOHN F.
13372 GOLF POINTE DRIVE
PORT CHARLOTTE, FL 33953 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: JOHN F. STANLEY

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Change (X) Addition
Name: THOMAS, GARY PRES.
Address: 3091 RIVERSHORE LANE
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: VP () Change (X) Addition
Name: TURNER, VIC VP
Address: 3341 BAY RIDGE WAY
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: SEC. () Change (X) Addition
Name: STANLEY, JOHN F SEC.
Address: 13372 GOLF POINTE DRIVE
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: TRES () Change (X) Addition
Name: FISCHER, SUE TREAS.
Address: 13799 PALMETTO POINTE CT.
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: DIR. () Change (X) Addition
Name: BERTSCH, DALE DIR.
Address: 3426 PENNYROYAL RD.
City-St-Zip: PORT CHARLOTTE, FL 33953

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GARY THOMAS

PRES

04/30/2009

Electronic Signature of Signing Officer or Director

Date