

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006515

FILED  
Sep 11, 2007  
Secretary of State

Entity Name: SEVEN RIVERS GOLF COURSE SUPERINTENDENTS ASSOCIATION INC.

## Current Principal Place of Business:

6201 KENTUCKY AVE  
NEW PORT RICHEY, FL 34653

## New Principal Place of Business:

2323 SW 35TH PLACE  
APT. # 7G  
GAINESVILLE, FL 32608

## Current Mailing Address:

6201 KENTUCKY AVE  
NEW PORT RICHEY, FL 34653

## New Mailing Address:

2323 SW 35TH PLACE  
APT. # 7G  
GAINESVILLE, FL 32608

FEI Number: 91-1391025      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

KANN, MARK  
6201 KENTUCKY AVENUE  
NEW PORT RICHEY, FL 34653      US

## Name and Address of New Registered Agent:

KANN, MARK  
2323 SW 35TH PLACE  
APT 7G  
GAINESVILLE, FL 32608 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

09/11/2007

Date

## OFFICERS AND DIRECTORS:

Title: P      ( ) Delete  
Name: KANN, MARK  
Address: 6201 KENTUCKY AVENUE  
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: V,T      ( ) Delete  
Name: WATTS, RICK  
Address: 5355 SE 44TH CIRCLE  
City-St-Zip: OCALA, FL 34480

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P      (X) Change ( ) Addition  
Name: KANN, MARK  
Address: 2323 SW 35TH PLACE  
City-St-Zip: GAINESVILLE, FL 32608

Title: T      (X) Change ( ) Addition  
Name: WATTS, RICK  
Address: 1328 SE 16TH STREET  
City-St-Zip: OCALA, FL 34471

Title: V      ( ) Change (X) Addition  
Name: SHAFFER, JIM  
Address: 890 N SABAL PALM WAY  
City-St-Zip: INVERNESS, FL 34456

Title: S      ( ) Change (X) Addition  
Name: ADAMS, DANIEL  
Address: 12044 KNOTTY PINE LOOP  
City-St-Zip: SAN ANTONIO, FL 33576

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: RICK WATTS

Electronic Signature of Signing Officer or Director

T

09/11/2007

Date