

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006515

FILED  
Mar 18, 2010  
Secretary of State

**Entity Name:** SEVEN RIVERS GOLF COURSE SUPERINTENDENTS ASSOCIATION INC.

**Current Principal Place of Business:**

1328 SE 16TH STREET  
OCALA, FL 34471

**New Principal Place of Business:**

**Current Mailing Address:**

1328 SE 16TH STREET  
OCALA, FL 34471

**New Mailing Address:**

**FEI Number:** 91-1391025

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

WATTS, RICK  
1328 SE 16TH STREET  
OCALA, FL 34471 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: P  
Name: SHAFFER, JIM  
Address: 890 N SABAL PALM WAY  
City-St-Zip: INVERNESS, FL 34453

Title: T  
Name: WATTS, RICK D  
Address: 1328 SE 16TH STREET  
City-St-Zip: OCALA, FL 34471

Title: V  
Name: ADAMS, DANIEL  
Address: 12044 KNOTTY PINE LOOP  
City-St-Zip: SAN ANTONIO, FL 33576

Title: S  
Name: JORGENSEN, ANDY  
Address: 5272 SW 115TH LOOP  
City-St-Zip: OCALA, FL 34476

Title: PP  
Name: KANN, MARK  
Address: 2520 W HWY 318  
City-St-Zip: CITRA, FL 32113

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: RICK D. WATTS

T

03/18/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date