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: SUZANNE DALESANDRO

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

10/28/2019 Date

2019 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 759655

Entity Name: SOUTH RIVER VILLAGE ONE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

30 SW SOUTH RIVER DRIVE STUART, FL 34997

Current Mailing Address:

30 SW SOUTH RIVER DRIVE STUART, FL 34997

FEI Number: 59-2142504

Name and Address of Current Registered Agent:

ROSS, DEBORAH ESQUIRE 789 S. FEDERAL HIGHWAY SUITE 101 STUART, FL 34994 US

Certificate of Status Desired: No

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	E DEBORAH ROSS			10/28/2019
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	PRESIDENT	Title	SECRETARY	
Name	DALESANDRO, SUZANNE	Name	WELLING, PAUL	
Address	30 SW SOUTH RIVER DRIVE	Address	30 SW SOUTH RIVER DRIVE	
City-State-Zip:	STUART FL 34997	City-State-Zip:	STUART FL 34997	
Title	TREASURER	Title	DIRECTOR	
Name	POLSELLI, AMATO	Name	WILSON, ROBERT	
Address	30 SW SOUTH RIVER DRIVE	Address	30 SW SOUTH RIVER DRIVE	
City-State-Zip:	STUART FL 34997	City-State-Zip:	STUART FL 34997	
Title	DIRECTOR			
Name	BAILES, LYNN			
Address	30 SW SOUTH RIVER DRIVE			
City-State-Zip:	STUART FL 34997			

FILED Oct 28, 2019 Secretary of State 6531801675CR