

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F12000004810

**Entity Name:** RIVERSTONE RESIDENTIAL SF, INC.

**Current Principal Place of Business:**

465 MEETING STREET, SUITE 500  
CHARLESTON, SC 29403

**Current Mailing Address:**

465 MEETING STREET, SUITE 500  
CHARLESTON, SC 29403 US

**FEI Number: 95-4733414**

**Certificate of Status Desired: No**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

Date

**Officer/Director Detail :**

Title           DIRECTOR  
Name           RAMSEY, J. DEREK  
Address        465 MEETING STREET, SUITE 500  
City-State-Zip: CHARLESTON SC 29403

Title           VP, TREASURER  
Name           FLETCHER, EDDIE  
Address        750 BERING DRIVE, SUITE 400  
City-State-Zip: HOUSTON TX 77057

Title           PRESIDENT  
Name           LIVINGSTONE, ANDREW  
Address        4030 BOY SCOUT BLVD, SUITE 800  
City-State-Zip: TAMPA FL 33607

Title           SECRETARY  
Name           NEWELL, CATHERINE  
Address        465 MEETING STREET, SUITE 500  
City-State-Zip: CHARLESTON SC 29403

*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: NEWELL , CATHERINE**

**SECRETARY**

**03/26/2019**

Electronic Signature of Signing Officer/Director Detail

Date