



**State of California  
Secretary of State**

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**E-K14315**

**FILED**

In the office of the Secretary of  
State of the State of California

**Mar - 19 2012**

This Space For Filing Use Only

**Statement of Information  
(Domestic Stock and Agricultural Cooperative Corporations)**

**FEES (Filing and Disclosure): \$25.00. If amendment, see instructions.  
IMPORTANT - READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

**1. CORPORATE NAME**

C2281461  
RIVIERA GOLF & TENNIS, INC.

**Due Date:**

**Complete Addresses for the Following (Do not abbreviate the name of the city. Items 2 and 3 cannot be P.O. Boxes.)**

2. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
1250 CAPRI DRIVE PACIFIC PALISADES CA 90272			
3. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
1250 CAPRI DRIVE PACIFIC PALISADES CA 90272			
4. MAILING ADDRESS OF THE CORPORATION, IF DIFFERENT THAN ITEM 2	CITY	STATE	ZIP CODE

**Names and Complete Addresses of the Following Officers (The corporation must list these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)**

5. CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
NOBORU WATANABE	1250 CAPRI DRIVE	PACIFIC PALISADES, CA	90272	
6. SECRETARY	ADDRESS	CITY	STATE	ZIP CODE
MEGAN FUJIKO WATANABE	1250 CAPRI DRIVE	PACIFIC PALISADES, CA	90272	
7. CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
MEGAN FUJIKO WATANABE	1250 CAPRI DRIVE	PACIFIC PALISADES	CA	90272

**Names and Complete Addresses of All Directors, Including Directors Who Are Also Officers (The corporation must have at least one director. Attach additional pages, if necessary.)**

8. NAME	ADDRESS	CITY	STATE	ZIP CODE
HIDEYA TERASHIMA	1250 CAPRI DRIVE	PACIFIC PALISADES, CA	90272	
9. NAME	ADDRESS	CITY	STATE	ZIP CODE
10. NAME	ADDRESS	CITY	STATE	ZIP CODE

11. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY: 0

**Agent for Service of Process (If the agent is an individual, the agent must reside in California and Item 13 must be completed with a California street address (a P.O.Box address is not acceptable). If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 13 must be left blank.)**

12. NAME OF AGENT FOR SERVICE OF PROCESS	CT CORPORATION SYSTEM		
13. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL	CITY	STATE	ZIP CODE

**Type of Business**

14. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION	GOLF AND TENNIS CLUB		
15. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.			
03/19/2012	ROBIN BENNETT	SR. PARALEGAL	
DATE	TYPE OR PRINT NAME OF PERSON COMPLETING THE FORM	TITLE	SIGNATURE