2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #719908

FILED Jan 20, 2005 8:00 am Secretary of State

01-20-2005 90042 029 ****61.25

1. Entity Nam SEVILLE	CONDOMINIUM #4, INC.			•			
Principal Place 1012 PEARC CLEARWATER	E DR	Mailing Address . 1012 PEARCE DR CLEARWATER, FL 33764	1	·	,	U4366	
2. Principal P	Place of Business	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01152005 Chg-NP CR2E037 (10/03)	
City & State	e	City & State			4. FEI Number 59-1733235	Applied For Not Applicable	
Zíp	Country	Zip	Country		s. Certificate of Status Desired Fee	.75 Additional Required	
	6. Name and Address of Current	t Registered Agent	<i>-</i>		7. Name and Address of New Registered Age	nt *	
ROBERTS, JAMES MR. 1012 PEARCE DRIVE #101 CLEARWATER, FL 33764			Street A	M5 LINDA Sowards Street Address (P.O. Box Number is Not Acceptable)			
			1012 PEARCE OR #108			Zip Code 33764	
8. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE L'INIO SOLVOURS - PRESIDENT DE LA SOLVOURS 1-15-05 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
Filing Fee is \$61.25 Due by May 1, 2005 9. Election Camp Trust Fund Cor			ontribution.		\$5.00 May Be Added to Fees	ent of State	
10.	OFFICERS AND D		11.		ADDITIONS/CHANGES TO OFFICERS AND DIREC	HORS IN 10	
TITLE	PD	52 -Delete	TITLE	49	LINDA SOWARDS B	(a. —	
NAME STREET ADDRESS	JAMES, ROBERTS JR.			1 -	PINON SOMEWAY	Change 🗀 Addition	
	1 1012 DEADAE DD #101		NAME	'	1012 PEARCE DR 4108		
	1012 PEARCE DR #101 CLEARWATER EL 33764		STREET ADDRESS		1012 PEARCE DR #108 CLEARWATER F1 33764		
CITY-ST-ZIP TITLE	CLEARWATER, FL 33764 VPD	™ Delete	STREET ADDRESS CITY-ST-ZIP TITLE	VPI	CLEARWATER FI 38764	【] Change ☐ Addition	
CITY-ST-ZIP TITLE NAME	CLEARWATER, FL 33764 VPD MALONE, SARA	5 23 -Delete	STREET ADDRESS CITY-ST-ZIP TITLE NAME		1012 PEARCE DR #108 CLEARWATER F1 33764	【] Change ☐ Addition	
CITY-ST-ZIP TITLE	CLEARWATER, FL 33764 VPD	⊠ -Delete	STREET ADDRESS CITY-ST-ZIP TITLE		CICALWATER FI 33764 LAURIE LOVE \$ 1012 PEARCE DR #20	I Change ☐ Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS	CLEARWATER, FL 33764 VPD MALONE, SARA 1012 PEARCE DRIVE #104	⊠CDelete	STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		LAURIC LOVE DA #200 Clearwater F1 30764 DAURIC LOVE DO 1012 PEARCE DR #201 Elearwater, F1 339	I Change □ Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	CLEARWATER, FL 33764 VPD MALONE, SARA 1012 PEARCE DRIVE #104 CLEARWATER, FL 33764 SD		STREET ADDRESS CITY-ST-ZIP IITLE NAME STREET ADDRESS CITY-ST-ZIP IITLE NAME STREET ADDRESS	VPI	LAURIC LOVE DA #200 Clearwater FI 30764 LAURIC LOVE DE #200 CIENTUATER DE #200 CIENTUATER FI 330 JOYXE ANDENORO PERECE DE #099	Change Addition Co 7 6 4 Change Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	CLEARWATER, FL 33764 VPD MALONE, SARA 1012 PEARCE DRIVE #104 CLEARWATER, FL 33764 SD STEWART, LESLEY		STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	VPI	LAURIC LOVE DA LOS PEARCE DR #20. LAURIC LOVE DE 1012 PEARCE DR #20. Clearwater, F1 33. Loure Andendro De 1012 Pearce De 109. Cienewater, F1 337	Change Addition Co 7 6 4 Change Addition Co	
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CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME NAME NAME	CLEARWATER, FL 33764 VPD MALONE, SARA 1012 PEARCE DRIVE #104 CLEARWATER, FL 33764 SD STEWART, LESLEY 1012 PEARCE DR #106 CLEARWATER, FL 33764 D LYNCH, DONALD	⊠ Delete	STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	VPI	LAURIE LOVE DA 108 CLEARWATER FI 33764 LAURIE LOVE DA 1012 PEARCE DR #20 CLEARWATER, FI 337 LOUXE ANDENDRO POLICE DE 109 CLEARWATER, FI 337 MARY THIS POWE!	Change Addition Co Change Addition Change Addition Co Change Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE JOLDE Cludeword Joyce C. Andenoro	1-15-05	727.791-0075
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR TRES.	Date	Daytane Phone #