

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 731489 (1)

1. Corporation Name
SEVILLA OWNERS ASSOCIATION, INC.



Principal Place of Business: BOX 1358 WINTER PARK FL 32790
Mailing Address: BOX 1358 WINTER PARK FL 32790

3. Date Incorporated or Qualified: 12/28/1974
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business: 21 P.O. Box 1344
2a. Mailing Address: 26 P.O. Box 1344
22 City & State: Winter Park FL
27 City & State: Winter Park FL
24 Zip: 32790 25 Country: USA
29 Zip: 32790 30 Country: USA

4. FEI Number: 23-7427808
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
**GRUBB, JOHN C
326 VALERA CT.
WINTER PARK FL 32789**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: FL

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)

12. OFFICERS AND DIRECTORS		
TITLE	PD CUTTING, A. N.	<input checked="" type="checkbox"/> DELETE
NAME	1667 BARCELONA WAY	
STREET ADDRESS	WINTER PARK FL	
CITY-ST-ZIP		
TITLE	TD GRUBB, JOHN C.	<input type="checkbox"/> DELETE
NAME	326 VALERA CT	
STREET ADDRESS	WINTER PARK FL 32789	
CITY-ST-ZIP		
TITLE	ATD MEHERG, ROBERT W.	<input checked="" type="checkbox"/> DELETE
NAME	1607 BARCELONA WAY	
STREET ADDRESS	WINTER PARK FL 32789	
CITY-ST-ZIP		
TITLE	DT SUTTON, GERALD S	<input type="checkbox"/> DELETE
NAME	310 SALVADOR SQUARE	
STREET ADDRESS	WINTER PARK FL	
CITY-ST-ZIP		
TITLE	DV MIKLESON, STEVE	<input type="checkbox"/> DELETE
NAME	320 VALERA CT.	
STREET ADDRESS	WINTER PARK FL	
CITY-ST-ZIP		
TITLE	DS DEUTSCH, NANCY	<input checked="" type="checkbox"/> DELETE
NAME	1608 BARCELONA WAY	
STREET ADDRESS	WINTER PARK FL	
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	President/Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Gerald S. Sutton Date: 3-28-96 Daytime Phone #: 407 629 0838

CFR2037 (12/95)