


FILE NOW: FILING FEE IS \$61.25

FILED  
May 20 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 731489 (1)**  
1. Corporation Name  
**SEVILLA OWNERS ASSOCIATION, INC.**

Principal Place of Business <b>P O BOX 1344 WINTER PARK FL 32780 US</b>	Mailing Address <b>P O BOX 1344 WINTER PARK FL 32780-1344 US</b>
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<b>2</b> Principal Place of Business	<b>2a</b> Mailing Address
<b>21</b> Suite, Apt. #, etc.	<b>26</b> Suite, Apt. #, etc.
<b>22</b> City & State	<b>27</b> City & State
<b>23</b> Zip Country	<b>28</b> Zip Country
<b>24</b>	<b>29</b>
<b>25</b>	<b>30</b>

<b>3</b> Date Incorporated or Qualified <b>12/28/1974</b>	<b>3a</b> Date of Last Report <b>07/01/1996</b>
<b>4</b> FEI Number <b>23-7427800 59-3431969</b>	Applied For Not Applicable
<b>5</b> Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
<b>6</b> Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
<b>8</b> This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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**

<b>81</b> Name
<b>82</b> Street Address (P.O. Box Number is Not Acceptable)
<b>83</b>
<b>84</b> City <b>FL</b> <b>85</b> Zip Code

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**12. OFFICERS AND DIRECTORS**

TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>GRUBB, JOHN C</b>	
STREET ADDRESS	<b>326 VALERA CT</b>	
CITY-ST-ZIP	<b>WINTER PARK FL</b>	
TITLE	<b>DT</b>	<input type="checkbox"/> DELETE
NAME	<b>SUTTON, GERALD S</b>	
STREET ADDRESS	<b>310 SALVADOR SQUARE</b>	
CITY-ST-ZIP	<b>WINTER PARK FL</b>	
TITLE	<b>PD</b>	<input type="checkbox"/> DELETE
NAME	<b>MIKKLESON, STEVE</b>	
STREET ADDRESS	<b>320 VALERA CT.</b>	
CITY-ST-ZIP	<b>WINTER PARK FL</b>	
TITLE	<b><del>DT</del></b>	<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

<b>1.1</b> TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>1.2</b> NAME	
<b>1.3</b> STREET ADDRESS	
<b>1.4</b> CITY-ST-ZIP	
<b>2.1</b> TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>2.2</b> NAME	
<b>2.3</b> STREET ADDRESS	
<b>2.4</b> CITY-ST-ZIP	
<b>3.1</b> TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>3.2</b> NAME	
<b>3.3</b> STREET ADDRESS	
<b>3.4</b> CITY-ST-ZIP	
<b>4.1</b> TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>4.2</b> NAME	<b>D S</b>
<b>4.3</b> STREET ADDRESS	<b>Yergay, David</b>
<b>4.4</b> CITY-ST-ZIP	<b>269 Salvador Sq. Winter Park FL 32789</b>
<b>5.1</b> TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>5.2</b> NAME	<b>D</b>
<b>5.3</b> STREET ADDRESS	<b>Cave, Julie</b>
<b>5.4</b> CITY-ST-ZIP	<b>221 Salvador Sq. Winter Park FL 32789</b>
<b>6.1</b> TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>6.2</b> NAME	<b>D</b>
<b>6.3</b> STREET ADDRESS	<b>Cutting, Neville</b>
<b>6.4</b> CITY-ST-ZIP	<b>1667 Barce long way Winter Park FL 32789</b>

**14.** I do 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 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 recipient 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: \_\_\_\_\_

CR2E037 (9/96)

5-5-97 437629 0835

Sevilla Owners Association, Inc.  
P.O. Box 1344  
Winter Park, FL 32790-1344

State of Florida  
1997 Nonprofit Corporation Annual Report  
Document # 731489

**Item 12. Additional Directors**

Director  
Hurt III, J.L.  
1655 Barcelona Way  
Winter Park, FL 32789

Director  
Schell, Nora  
1719 Barcelona Way  
Winter Park, FL 32789

Director  
Kelley, Debbie  
203 Salvador Sq.  
Winter Park, FL 32789