

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 19, 2001 8:00 am
Secretary of State

01-19-2001 90100 030 ****61.25

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DOCUMENT # 731489

1. Entity Name

SEVILLA OWNERS ASSOCIATION, INC.

Principal Place of Business

P O BOX 1344
 WINTER PARK FL 32790
 US

Mailing Address

P O BOX 1344
 WINTER PARK FL 32790
 US

300310



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3431969

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SUTTON, GERALD S
310 SALVADOR SQ.
WINTER PARK FL 32789

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** Delete
 NAME **GLASCO, JOEL**
 STREET ADDRESS **311 SANTIAGO DR**
 CITY-ST-ZIP **WINTER PARK FL 32789**

TITLE **DP** Change Addition
 NAME **Barbara E. Thomas**
 STREET ADDRESS **1648 Barcelona Way**
 CITY-ST-ZIP **Winter Park FL 32789**

TITLE **DT** Delete
 NAME **SUTTON, GERALD S**
 STREET ADDRESS **310 SALVADOR SQUARE**
 CITY-ST-ZIP **WINTER PARK FL**

TITLE **DS** Change Addition
 NAME **Sharon Stieg**
 STREET ADDRESS **251 Salvador Sq.**
 CITY-ST-ZIP **Winter Park FL 32789**

TITLE **D** Delete
 NAME **YERGEY, DAVID**
 STREET ADDRESS **269 SALVADOR SQUARE**
 CITY-ST-ZIP **WINTER PRK FL**

TITLE **D** Change Addition
 NAME **Carol Hille**
 STREET ADDRESS **1631 Barcelona Way**
 CITY-ST-ZIP **Winter Park FL 32789**

TITLE **D** Delete
 NAME **KELLEY, DEBBIE**
 STREET ADDRESS **203 SALVADOR SQ.**
 CITY-ST-ZIP **WINTER PARK FL 32789**

TITLE **D** Change Addition
 NAME **Clair H. Fournier**
 STREET ADDRESS **1647 Barcelona Way**
 CITY-ST-ZIP **Winter Park FL 32789**

TITLE **D** Delete
 NAME **CAVE, RICHARD**
 STREET ADDRESS **221 SALVADOR SQ**
 CITY-ST-ZIP **WINTER PARK FL 32789**

TITLE **D** Change Addition
 NAME **Donald Plumley**
 STREET ADDRESS **1639 Barcelona Way**
 CITY-ST-ZIP **Winter Park FL 32789**

TITLE **D** Delete
 NAME **LORENZEN, SHERRY**
 STREET ADDRESS **320 SANTIAGO DR**
 CITY-ST-ZIP **WINTER PARK FL 32789**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

SIGNATURE **Resigned S. Sutton** 1-9-01 4676290838

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)