1/18/00-90097-032-$61.25-$61.25

DOCUMENT # N21508

1. Entity Name

SEVILLA CONDOMINIUM ASSOCIATION, INC.

FILED
Apr 27, 2000 8:00 am
Secretary of State
01-18-2000 90097 032 ****61.25

Principal Place of Business	Mailing Address
1800 SEVILLA BLVD. ATLANTIC BEACH FL 32233	1800 SEVILLA BLVD. ATLANTIC BEACH FL 32233-5622

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2146076 ☐ Applied For ☐ Not Applicable

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
BRECKINRIDGE, DAVID 1810 SEVILLA BLVD STE 105 ATLANTIC BEACH FL 32233	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 D. Breckinridge
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	P MULLINS, HAROLD E 1810 SEVILLA BLVD, STE 203 ATLANTIC BEACH FL 32233	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P D O'MALLEY, BRIAN P. 1820 SEVILLA BLVD STE 309 ATLANTIC BEACH, FL. 32233 D	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP O'MALLEY, BRIAN P 1820 SEVILLA BLVD, STE 309 ATLANTIC BEACH FL 32233	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPHUTTON, ROBERT D1820 SEVILLA BLVD STE 204 ATLANTIC BEACH, FL. 32233 D	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD BRUMBACH, BARBARA C 1830 SEVILLA BLVD #309 ATLANTIC BEACH FL 32233	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SBRECKINRIDGE, DAVID 1810 SEVILLA BLVD STE 105 ATLANTIC BEACH, FL. 32233 D	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T BRECKINRIDGE, DAVID 1810 SEVILLA BLVD, STE 105 ATLANTIC BEACH FL 32233	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T KAREN REED 1830 SEVILLA BLVD STE 106 ATLANTIC BEACH, FL. 32233 T	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AT ROGOSHESKE, KENNETH C 1810 SEVILLA BLVD, STE 306 ATLANTIC BEACH FL 32233	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

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 REQUIRED D. BRECKINRIDGE (904) 247-5721
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #