

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27535

FILED
Feb 03, 2009
Secretary of State

Entity Name: SEVILLA GARDENS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1800 SEVILLA BLVD
ATLANTIC BEACH, FL 32233 US

New Principal Place of Business:

Current Mailing Address:

C/O HILLEGASS, CHEPENIK & HOOD, CPA'S
427 THIRD STREET NORTH
JACKSONVILLE BEACH, FL 32250 US

New Mailing Address:

FEI Number: 59-2959471 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HOOD, TERRY J CPA
C/O HILLEGASS, CHEPENIK & HOOD CPA'S
427 THIRD STREET NORTH
JACKSONVILLE BEACH, FL 32250 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: DS () Delete
Name: GRIC, OC
Address: 1984 SEVILLA BLVD W
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: P () Delete
Name: RADCLIFFE, JOHN
Address: 1921 SEVILLA BLVD W
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: DT () Delete
Name: DAVIDSON, KATHERINE
Address: 1913 SEVILLA BLVD W
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: VP () Delete
Name: COEVER, DEAN
Address: 1894 SELVA MARINA DR
City-St-Zip: ATLANTIC BEACH, FL 32233

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN RADCLIFFE

P

02/03/2009

Electronic Signature of Signing Officer or Director

_____ Date