

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731489

Entity Name: SEVILLA OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

310 SALVADOR SQ
WINTER PARK, FL 32789

Current Mailing Address:

P O BOX 1344
WINTER PARK, FL 32790 US

FEI Number: 59-3431969

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

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

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

Officer/Director Detail :

Title DIRECTOR, TREASURER
Name PRIME, PAMELA
Address P O BOX 1344
City-State-Zip: WINTER PARK FL 32790

Title DIRECTOR
Name ARNOLD, ROBERT
Address P O BOX 1344
City-State-Zip: WINTER PARK FL 32790

Title VP, DIRECTOR
Name SUTTON, JANIE
Address P O BOX 1344
City-State-Zip: WINTER PARK FL 32790

Title PRESIDENT, DIRECTOR
Name PHILIPS, CATHERINE
Address P O BOX 1344
City-State-Zip: WINTER PARK FL 32790

Title DIRECTOR, SECRETARY
Name BASSIL, CAMILLE
Address P O BOX 1344
City-State-Zip: WINTER PARK FL 32790

Title DIRECTOR
Name STRONG, MORGAN
Address P O BOX 1344
City-State-Zip: WINTER PARK FL 32790

Title DIRECTOR
Name PLUMLEY, ROSE
Address P O BOX 1344
City-State-Zip: WINTER PARK FL 32790

Title DIRECTOR
Name BLEAKLEY, TODD
Address P O BOX 1344
City-State-Zip: WINTER PARK FL 32790

Continues on page 2

I hereby 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 all other like empowered.

SIGNATURE: CATHERINE PHILIPS

PRESIDENT

02/11/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR

Name QURESHI, DEVIN

Address P O BOX 1344

City-State-Zip: WINTER PARK FL 32790