

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000003282

**Entity Name:** SEVILLA BUILDING CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**2855 LEJEUNE RD, 4TH FLOOR  
CORAL GABLES, FL 33134**Current Mailing Address:**2855 LEJEUNE RD, 4TH FLOOR  
CORAL GABLES, FL 33134**FEI Number:** 26-0631141**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COBB, KOLLEEN O.P.  
2855 LEJEUNE RD, 4TH FLOOR  
CORAL GABLES, FL 33134 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:** KOLLEEN O.P. COBB

04/23/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP, DIRECTOR  
Name GODOY, JUAN  
Address 2855 LEJEUNE ROAD 4TH FLOOR  
City-State-Zip: CORAL GABLES FL 33134

Title VP, DIRECTOR  
Name COBB, KOLLEEN O.P.  
Address 2855 LEJEUNE RD, 4TH FLOOR  
City-State-Zip: CORAL GABLES FL 33134

Title D  
Name MONTES, GEORGE  
Address 25 WEST FLAGLER STREET, SUITE  
711  
City-State-Zip: MIAMI FL 33130

Title D  
Name BARBER, EDWARD  
Address 25 WEST FLAGLER STREET, SUITE  
711  
City-State-Zip: MIAMI FL 33130

Title T  
Name STORMES, JEANNE  
Address 4601 TOUCHTON RD BLDG 300  
City-State-Zip: JACKSONVILLE FL 32246

*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:** KOLLEEN O.P. COBB**DIRECTOR**

04/23/2014

Electronic Signature of Signing Officer/Director Detail

Date