

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 335568

FILED  
Feb 22, 2011  
Secretary of State

**Entity Name:** SEMINOLE GARDENS APARTMENT NO 19-E, INC.

**Current Principal Place of Business:**

8330 112TH ST. N.  
SEMINOLE, FL 33772 US

**New Principal Place of Business:**

**Current Mailing Address:**

8330 112TH ST. N.  
SEMINOLE, FL 33772 US

**New Mailing Address:**

**FEI Number:** 59-1235142

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PEACOCK, TOMMAY T PRES  
8330 112TH ST. NORTH  
SEMINOLE, FL 33772 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: 1VP  
Name: SHOREY, B E  
Address: 8330 112TH ST N  
City-St-Zip: SEMINOLE, FL 33772 US

Title: PRES  
Name: PETSIS, BETTY V  
Address: 8330 112TH ST N  
City-St-Zip: SEMINOLE, FL 33772 US

Title: ASST  
Name: SANDBERG, BARBARA  
Address: 8330 112TH ST N  
City-St-Zip: SEMINOLE, FL 33772 US

Title: 2VP  
Name: MCCANN, VENEVIN  
Address: 8330 112TH ST N  
City-St-Zip: SEMINOLE, FL 33777 US

Title: S/T  
Name: SAMMETINGER, RUTH  
Address: 8330 112TH ST N  
City-St-Zip: SEMINOLE, FL 33772 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: B.E. SHOREY

1VP

02/22/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date