

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719199

FILED
Apr 03, 2009
Secretary of State

Entity Name: SEVILLE CONDOMINIUM 3, INC.

Current Principal Place of Business:

1009 PEARCE DR
CLEARWATER, FL 337641100 US

New Principal Place of Business:

Current Mailing Address:

1009 PEARCE DR
LOBBY BOX
CLEARWATER, FL 337641100 US

New Mailing Address:

FEI Number: 59-1797821

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRUNSON, JOHN
4250 CENTRAL AVE
ST PETERSBURG, FL 33711 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: PRES () Delete
Name: BARRY, JOYCE
Address: 1009 PEARCE DR #101
City-St-Zip: CLEARWATER, FL 337641110

Title: SEC () Delete
Name: LITWINSKI, CINDY
Address: 1009 PEARCE DR #106
City-St-Zip: CLEARWATER, FL 33764

Title: TRES () Delete
Name: WHITCOMB, REGINA
Address: 1009 PEARCE DRIVE, #210
City-St-Zip: CLEARWATER, FL 33764

Title: VP () Delete
Name: RODRIGUEZ, JOSE
Address: 1009 PEARCE DR #111
City-St-Zip: CLEARWATER, FL 33764

Title: DIR () Delete
Name: BUONO, FRANK
Address: 1009 PEARCE DR., #204
City-St-Zip: CLEARWATER, FL 33764

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:

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: REGINA WHITCOMB

TRES

04/03/2009

Electronic Signature of Signing Officer or Director

Date