

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 719367

**FILED**  
**Mar 15, 2010**  
**Secretary of State**

**Entity Name:** SEMINOLE-ON-THE-GREEN, VILLAS UNIT NO. ONE NORTH ASSOCIATION, INC.

**Current Principal Place of Business:**

8940 A PARK BLVD.  
SEMINOLE, FL 33772 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O SEMINOLE ACCOUNTANTS, INC.  
9996 SEMINOLE BLVD  
SEMINOLE, FL 33772 US

**New Mailing Address:**

**FEI Number:** 59-1539060      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

LYNCH, GARRICK J  
9996 SEMINOLE BLVD  
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: PD  
Name: MALKIN, ED  
Address: 8930 A PARK BLVD  
City-St-Zip: SEMINOLE, FL 33777

Title: VP  
Name: HARTWAY, MYRT  
Address: 8940 A PARK BLVD  
City-St-Zip: SEMINOLE, FL 33777

Title: D  
Name: LEMKE, GUNTER  
Address: 8940 B PARK BLVD  
City-St-Zip: SEMINOLE, FL 33777

Title: D  
Name: STEAD, RICHARD  
Address: 8960 B PARK BLVD  
City-St-Zip: SEMINOLE, FL 33777

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: ED MALKIN

P

03/15/2010

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

\_\_\_\_\_  
Date