2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#719368

FILED Apr 26, 2007 Secretary of State

Entity Name: SEMINOLE-ON-THE-GREEN, CAVALIER BUILDING ONE ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	K BOULEVARI)			
APT 110 SEMINOLE	E, FL 33777	US			
Current M	lailing Addres	ss:	New Mailing Addres	ss:	
RESOUR	SOURCE PROPERTY MANAGEMENT				
	K STREET E, FL 33777	US			
FEI Number:	: 59-1674716	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
REINHARI	DT, DEBBIE		REINHARDT, DEBRA	4	
	K BLVD #305 E, FL 33777	US	7300 PARK STREET SEMINOLE, FL 3377		
	named entity : e of Florida.	submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,	
	RE: DEBRAF	REINHARDT		04/26/2007	
	Electror	ic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	P () DAGGY, JO AN 8950 PARK BL' SEMINOLE, FL	VD #103	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ST () KRUPA, TOM 8950 PARK BL' SEMINOLE, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () LEWIS, RICHA 8950 PARK BL' SEMINOLE, FL	VD #105	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () ROBEY, ROBE 8950 PARK BL' SEMINOLE, FL	VD #202	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () NAVARRE, FRE 8950 PARK BL' SEMINOLE, FL	VD #505	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () WAGGETT, RA 8950 PARK BL' SEMINOLE, FL	VD. #504	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: DANIEL FULTON PM 04/26/2007