2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721281

City-St-Zip:

Title:

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CLEARWATER, FL 33764 US
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GIORDANO, ALFIO

2630 PEARCE DR #207

RAYMOND, DONALD B

2630 PEARCE DR #209

2630 PEARCE DR #109

CLEARWATER, FL 33764

HOPKINS, P. Z

Current Principal Place of Business:

Entity Name: SEVILLE CONDOMINIUM 11, INC.

FILED Mar 29, 2009 Secretary of State

New Principal Place of Business:

| | TARPON AVENUE SPRINGS, FL 34689 | US | | | | | |
|--|--|--------------------------|---|--|----------------------------|---------|--|
| Current Mailing Address: | | | New Mailing Address: | | | | |
| | TARPON AVENUE BPRINGS, FL 34689 | US | | | | | |
| FEI Number: | 59-1745026 FEI Nu | ımber Applied For() | FEI Number Not Appl | icable () | Certificate of Status Desi | red () | |
| Name and Address of Current Registered Agent: Name and Address of New Registered | | | | | New Registered Agent: | : | |
| WHETZEL, TERRI B 600 EAST TARPON AVENUE TARPON SPRINGS, FL 34689 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: | | | | | | | |
| | Electronic Signa | ature of Registered Ager | nt | | Date | | |
| OFFICERS AND DIRECTORS: | | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | | |
| Title: Name: Address: City-St-Zip: | PD () Delete GIORDANO, SUZANNE 2630 PEACE DR #207 CLEARWATER, FL 3370 | 64 US | Title: Name: Address: City-St-Zip: | GIORDANO, SI 2630 PEACE D | | | |
| Title: Name: Address: City-St-Zip: | VPD () Delete THIERRY, CHRISTIAN R 2630 PEARCE DR #504 CLEARWATER, FL 3370 | | Title: Name: Address: City-St-Zip: | THIERRY, CHE 2630 PEARCE | | | |
| Title: Name: Address: | TD () Delete DUFF, BECKY S 2630 PEARCE DR #109 | | Title: Name: Address: | (|) 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

City-St-Zip:

SD

HOPKINS, PZ

2630 PEARCE DR #109

CLEARWATER, FL 33764 US

(X) Change () Addition

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Title:

Title:

Name:

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Address:

City-St-Zip:

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City-St-Zip:

Name:

Address:

City-St-Zip:

SIGNATURE: CHRISTIAN R. THIERRY PD 03/29/2009

above, or on an attachment with an address, with all other like empowered.