

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724505

FILED
Mar 29, 2009
Secretary of State

Entity Name: SEVILLE CONDOMINIUM 12, INC.

Current Principal Place of Business:

600 EAST TARPON AVENUE
TARPON SPRINGS, FL 34689 US

New Principal Place of Business:

Current Mailing Address:

600 EAST TARPON AVENUE
TARPON SPRINGS, FL 34689 US

New Mailing Address:

FEI Number: 59-2351724

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHETZEL, TERRI B
600 EAST TARPON AVENUE
TARPON SPRINGS, FL 34689 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: VPD () Delete
Name: GIESTING, COLLEEN M
Address: 2699 SEVILLE BLVD #604
City-St-Zip: CLEARWATER, FL 33764 US

Title: TD () Delete
Name: DECELIS, WALTER
Address: 2699 SEVILLE BLVD #407
City-St-Zip: CLEARWATER, FL 33764 US

Title: PD () Delete
Name: SMALL, ANITA
Address: 2699 SEVILLE BLVD #510
City-St-Zip: CLEARWATER, FL 33764 US

Title: SD () Delete
Name: ZAVODNEY, CHRIS
Address: 2699 SEVILLE BLVD #706
City-St-Zip: CLEARWATER, FL 33764 US

Title: D () Delete
Name: WARDEN, RONALD
Address: 663 MONTE CRISTO BLVD
City-St-Zip: ST. PETERSBURG, FL 33715 US

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: SD (X) Change () Addition
Name: BOSSUYT, PHYLLIS A
Address: 2699 SEVILLE BLVD #707
City-St-Zip: CLEARWATER, FL 33764 US

Title: D (X) Change () Addition
Name: MIGORA, WILLIAM G
Address: 2699 SEVILLE BLVD #305
City-St-Zip: CLEARWATER, FL 33764 US

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: ANITA SMALL

PD

03/29/2009

Electronic Signature of Signing Officer or Director

Date