2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2009
Secretary of State

DOCUMENT# N00000002878

Entity Name: SEVILLE PLACE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

624 E. GOVERNMENT ST
PENSACOLA, FL 32502

New Principal Place of Business:

624 E. GOVERNMENT ST
PENSACOLA, FL 32502 US

Current Mailing Address:

624 E. GOVERNMENT ST
PENSACOLA, FL 32502

New Mailing Address:

624 E. GOVERNMENT ST
PENSACOLA, FL 32502 US

FEI Number: 59-3706222 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WARE, WAYNE
624 E. GOVERNMENT STREET
PENSACOLA, FL 32502 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: D ( ) Delete
Name: SHORTALL, WILMA W
Address: 618 GOVENMENT ST
City-St-Zip: PENSACOLA, FL 32502

Title: ST ( ) Delete
Name: WARE, WAYNE
Address: 624 EAST GOVERNMENT ST.
City-St-Zip: PENSACOLA, FL 32502

Title: P ( ) Delete
Name: BONIFAY, ROSE M
Address: 622 EAST GOVERNMENT ST.
City-St-Zip: PENSACOLA, FL 32502

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: SHORTALL, WILMA W
Address: 618 E. GOVERNMENT ST
City-St-Zip: PENSACOLA, FL 32502

Title: ST (X) Change ( ) Addition
Name: WARE, WAYNE
Address: 624 E. GOVERNMENT ST
City-St-Zip: PENSACOLA, FL 32502

Title: P (X) Change ( ) Addition
Name: BONIFAY, ROSE M
Address: 622 E. GOVERNMENT ST
City-St-Zip: PENSACOLA, FL 32502

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: WAYNE WARE ST 03/25/2009

Electronic Signature of Signing Officer or Director — Date