2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00663

FILED Mar 17, 2009 Secretary of State

Entity Name: CLUB SEVILLA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 4646 W. IRLO BRONSON MEMORIAL HWY KISSIMMEE, FL 347465319

Current Mailing Address: New Mailing Address:

4646 W. IRLO BRONSON MEMORIAL HWY KISSIMMEE, FL 347465319

FEI Number: 59-2364413 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SLAMAN, ROBERT A 4646 W. ÍRLO BRONSON MEM. HWY KISSIMMEE, FL 34746

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete KREGIEL, PATRICK KREGIEL, PATRICK Name: Name: 1000 MERWIN ROAD Address: 1000 MERWIN ROAD Address:

City-St-Zip: NEW KENSINGTON, PA City-St-Zip: NEW KENSINGTON, PA

Title: PD () Delete Title: VD (X) Change () Addition KEANTZ, JOSEPHINE Name: KRANTZ, JOSEPHINE Name:

Address: 9 FRENCH MEN'S KEY Address: 9 FRENCH MEN'S KEY City-St-Zip: WILLIAMSBURG, VA 23185 City-St-Zip: WILLIAMSBURG, VA 23185

Title: VTD () Delete Title: () Change () Addition

HEYDE, RICK Name: Name: Address: RR 1, BOX 213 Address: City-St-Zip: KENTLAND, IN City-St-Zip:

Title: VD () Delete Title: () Change () Addition

Name: SHUSTER, DON Name: 4646 W. IRLO BRONSON HWY. Address: Address: City-St-Zip: KISSIMMEE, FL 34746 City-St-Zip:

Title: VTD () Delete Title: VTD (X) Change () Addition

ECKERT, ERNEST HICKS, CINDY Name: Name: 300 SOUTH 2ND 300 SOUTH 2ND Address: Address: City-St-Zip: LEHIGHTON, PA City-St-Zip: LEHIGHTON, PA

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: PAT KRIEGAL Ρ 03/17/2009