2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008164

FILED Mar 16, 2009 Secretary of State

Entity Name: SEVILLA AT WORLD COMMERCE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

414 OLD HARD ROAD 414 OLD HARD ROAD

SUITE 201 SUITE 201

ORANGE PARK, FL 320033408 US FLEMING ISLAND, FL 320033408 US

Current Mailing Address: New Mailing Address:

414 OLD HARD ROAD 414 OLD HARD ROAD

SUITE 201 SUITE 201

ORANGE PARK, FL 320033408 US FLEMING ISLAND, FL 320033408 US

FEI Number: 20-2229857 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:

WOOD, SUSAN D FLORIDIAN PROPERTY MANAGEMENT, LLC 414 OLD HARD ROAD

414 OLD HARD ROAD

SUITE 201 SUITE 201 FLEMING ISLAND, FL 320033408 US ORANGE PARK, FL 320033408 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: SUSAN D WOOD 03/16/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

WOOD, SUSAN DIPRES CAHOON, LOGAN Name: Name: 414 OLD HARD ROAD, SUITE 201 Address: 501 RIVERSIDE AVENUE, SUITE 902 Address:

City-St-Zip: ORANGE PARK, FL 320033408 US City-St-Zip: JACKSONVILLE, FL 32202 US

Title: () Delete Title: VD (X) Change () Addition MCNEAL, DOLORES C T Name: LITTON, BEN Name:

Address: 414 OLD HARD ROAD, SUITE 201 Address: 913 LAS NAVAS PLACE City-St-Zip: ORANGE PARK, FL 320033408 US City-St-Zip: ST AUGUSTINE, FL 32092 US

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

SPENCER, SANDRA S SEC Name: SCHROEDER, BILL Name: 414 OLD HARD ROAD, SUITE 201 501 RIVERSIDE AVENUE, SUITE 902 Address: Address: City-St-Zip: ORANGE PARK, FL 320033408 US City-St-Zip: JACKSONVILLE, FL 32202 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: SUSAN D WOOD RΑ 03/16/2009