

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009284

FILED
Apr 27, 2005
Secretary of State

Entity Name: SEVDL, INC.

Current Principal Place of Business:

P. O. BOX 135
EDGEWATER, FL 32132

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 135
EDGEWATER, FL 32132

New Mailing Address:

FEI Number: 20-1674684

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINDROTH, JASON
1405 3RD STREET
EDGEWATER, FL 32132 US

Name and Address of New Registered Agent:

LAUGHLIN, WALTER E
2220 HIBISCUS DR #8
EDGEWATER, FL 32141 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: WALTER E LAUGHLIN

04/27/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LINDROTH, JASON
Address: 1405 3RD STREET
City-St-Zip: EDGEWATER, FL 32132

Title: VP () Delete
Name: GRENON, TOBY
Address: 2743 DATE PALM DR
City-St-Zip: EDGEWATER, FL 32141

Title: T () Delete
Name: LARRIMORE, GAIL
Address: 2504 ROYAL PALM DR
City-St-Zip: EDGEWATER, FL 32141

Title: DIR () Delete
Name: LAUGHLIN, WALTER
Address: 2117 JUNIPER DR
City-St-Zip: EDGEWATER, FL 32141

Title: DIR () Delete
Name: MOORE, JOHN
Address: 2709 EVERGREEN DR
City-St-Zip: EDGEWATER, FL 32141

Title: DIR () Delete
Name: GRENON, LORI
Address: 2743 DATE PALM DR
City-St-Zip: EDGEWATER, FL 32141

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KOENIG, ED
Address: 144 S CORY DR
City-St-Zip: EDGEWATER, FL 32141

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DIR (X) Change () Addition
Name: LAUGHLIN, WALTER
Address: 2220 HIBISCUS DR #8
City-St-Zip: EDGEWATER, FL 32141

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WALTER E LAUGHLIN

DIR

04/27/2005

Electronic Signature of Signing Officer or Director

Date