2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 21, 2008
Secretary of State

DOCUMENT# N05000010260

Entity Name: SEYBOLD CITY HOMES PROPERTY OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

2506 S. MACDILL AVE.
SUITE A
TAMPA, FL 33629

New Principal Place of Business:

Current Mailing Address:

2506 S. MACDILL AVE.
SUITE A
TAMPA, FL 33629

New Mailing Address:

FEI Number: 20-3578896 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MAYTS, ANDREW J JR.
201 N. ARMENIA AVE.
TAMPA, FL 33609 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: PD ( ) Delete
Name: LANDERS, JAMES F
Address: 2506 S. MACDILL AVE., SUITE A
City-St-Zip: TAMPA, FL 33629

Title: VD ( ) Delete
Name: RAPPAPORT, JASON
Address: 2506 S. MACDILL AVE., SUITE A
City-St-Zip: TAMPA, FL 33629

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SMITH, DANNA
Address: 401 S. OREGON AVENUE
City-St-Zip: TAMPA, FL 33606

Title: VP (X) Change ( ) Addition
Name: BITTNER, TRAVIS M
Address: 403 S. OREGON AVENUE
City-St-Zip: TAMPA, FL 33606

Title: ST ( ) Change (X) Addition
Name: SEYMOUR, DELORES
Address: 419 S. OREGON AVENUE
City-St-Zip: TAMPA, FL 33606

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: DANNA SMITH P 07/21/2008

Electronic Signature of Signing Officer or Director — Date