2005

~~2005~~ NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 11, 2005 8:00 am
Secretary of State
02-11-2005 90039 008 ****61.25

40017293

MOORE CR2E037 (11/03)

DOCUMENT # N08459

1. Entity Name
SEVILLE COURT RESIDENTS' ASSOCIATION, INC.

403 NE 4TH AVENUE
HALLANDALE FL. 33009
US

338 NE CEDAR ST
HALLANDALE FL ~~33009~~ 33009
U.S.

2. Principal Place of Business	3. Mailing Address
	ROBIN LAVOIE
Suite, Apt. #, etc.	Suite, Apt. #, etc. 338 CEDAR ST
City & State	City & State HALLANDALE, FL.
Zip / Country	Zip 33009 / Country US

4. FEI Number NO-T APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name ROBIN LAVOIE
Street Address (P.O. Box Number is Not Acceptable)
338 CEDAR - ST.
City HALLANDALE FL Zip Code 33009

8. ...ent for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ROBIN LAVOIE, TRESURER. Robin Lavoie 07-04-2005
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25
Due By May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PRESIDENT ☐ Change	TITLE	Vice-president
NAME	RAYMOND SIROIS	NAME	JULIEN TRUCHON
STREET ADDRESS	409 N.E. 4 COURT	STREET ADDRESS	318 N.E. 5th ST.
CITY-ST-ZIP	HALLANDALE FL 33009	CITY-ST-ZIP	Hallandale Fl. 33009
TITLE	SECRETARY ☐ Change	TITLE	
NAME	HENRIETTE BOUCHER	NAME	
STREET ADDRESS	409 N.E. MAPLE, ST.	STREET ADDRESS	
CITY-ST-ZIP	HALLANDALE, FL. 33009	CITY-ST-ZIP	
TITLE	TRESURER ☐ Change	TITLE	
NAME	ROBIN LAVOIE	NAME	
STREET ADDRESS	338 CEDAR ST	STREET ADDRESS	
CITY-ST-ZIP	HALLANDALE, FL. 33009	CITY-ST-ZIP	
TITLE	DIR. ☐ Change	TITLE	
NAME	ROLAND GENDRON	NAME	
STREET ADDRESS	396 N.E. 5TH - ST	STREET ADDRESS	
CITY-ST-ZIP	HALLANDALE, FL 33009	CITY-ST-ZIP	
TITLE	DIR ☐ Change	TITLE	
NAME	BERTRAND LAFONTAINE	NAME	
STREET ADDRESS	346 MAPLE ST.	STREET ADDRESS	
CITY-ST-ZIP	HALLANDALE, FL. 33009	CITY-ST-ZIP	
TITLE	☐ Change	TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachm... e empowered.

Robin Lavoie ROBIN LAVOIE 02-03-05 954-454-0251