

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2007 8:00 am
Secretary of State

05-01-2007 90016 008 ****61.25

DOCUMENT # N27169 1. Entity Name SEVILLE AT CENTER GATE HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 4358 MARCOTT CIR SARASOTA, FL 34233 US			Mailing Address 5824 BEE RIDGE RD BOX 122 SARASOTA, FL 34233		
2. Principal Place of Business - No P.O. Box # DELLCOR MANAGEMENT		3. Mailing Address DELLCOR MANAGEMENT			
Suite, Apt. #, etc. 310 PEARL AVENUE		Suite, Apt. #, etc. 310 PEARL AVENUE			
City & State SARASOTA FL		City & State SARASOTA, FL			
Zip 34243		Country USA		4. FEI Number 65-0104874	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent RAMSAY, JOHN 4358 MARCOTT CIR SARASOTA, FL 34233			7. Name and Address of New Registered Agent Name DELLCOR MANAGEMENT, INC. Street Address (P.O. Box Number is Not Acceptable) 310 PEARL AVENUE City SARASOTA FL Zip Code 34243		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>[Signature]</i></u> DATE 4/20/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MCGILVRAY, ANN 4313 MARCOTT CIRCLE SARASOTA, FL 34233	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD RAMSAY, JOHN 4358 MARCOTT CIRCLE SARASOTA, FL 34233	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D SCHOOL, CAROL 4349 MARCOTT CIRCLE SARASOTA, FL 34233	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MILLER, JAREN 4322 MARCOTT CIRCLE SARASOTA, FL 34233	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WENN, JUNE 4341 MARGOTT CIRCLE SARASOTA, FL 34233	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete			
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DVE, NEDRA 4349 MARCOTT CIRCLE SARASOTA, FL 34233	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ROSE, STEVE 4326 MARCOTT CIRCLE SARASOTA, FL 34233	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GREGORY, GENE 4334 MARCOTT CIRCLE SARASOTA, FL 34233	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TIKALA, CAROL 4350 MARCOTT CIRCLE SARASOTA, FL 34233	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STALKER, BETTE 4345 MARCOTT CIRCLE SARASOTA, FL 34233	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>[Signature]</i></u> DATE 4/20/07 DAYTIME PHONE # 941-358-3366 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

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