

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48232

FILED
Apr 20, 2011
Secretary of State

Entity Name: SEILER-DEVORE PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

POST OFFICE 5041
SALT SPRINGS, FL 32134

New Principal Place of Business:

25250 NE 132ND LN
SALT SPRINGS, FL 32134

Current Mailing Address:

POST OFFICE 5041
SALT SPRINGS, FL 32134

New Mailing Address:

FEI Number: 59-2538711

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEREZ, MARY
25250 NE 132ND LN
SALT SPRINGS, FL 32134 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: PRES
Name: SUBER, DAVE
Address: 4304 SW 20TH ST
City-St-Zip: OCALA, FL 34471

Title: VP
Name: FULFORD, DAVE
Address: 1420 SW 21 AVE
City-St-Zip: OCALA, FL 34471

Title: TREA
Name: PEREZ, MARY
Address: 25250 NE 132ND LN
City-St-Zip: SALT SPRINGS, FL 32134

Title: SEC
Name: FULFORD, KAREN
Address: 1420 SW 21 AVE
City-St-Zip: OCALA, FL 34471

Title: DIR
Name: SUBER, LAURA
Address: 4304 SW 20 ST
City-St-Zip: OCALA, FL 34471

Title: DIR
Name: THOMAS, PAM
Address: 25265 NE 132ND LN
City-St-Zip: SALT SPRINGS, FL 32134

I hereby 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 all other like empowered.

SIGNATURE: MARY I PEREZ

TREA

04/20/2011

Electronic Signature of Signing Officer or Director

Date