2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2008
Secretary of State

DOCUMENT# N95000006001

Entity Name: SEVILLE CHASE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

498 PALM SPRING DR
SUITE 235
ALTAMONTE SPRINGS, FL 32701

Current Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044

New Mailing Address:

498 PALM SPRING DR
SUITE 235
ALTAMONTE SPRINGS, FL 32701

FEI Number: 59-3432020 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BOYLE, JAMES W
498 PALM SPRINGS DR #235
ALTAMONTE SPRINGS, FL 32701 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: JAMES W BOYLE 04/01/2008
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SILVER, ANDREW
Address: 154 SEVILLE CHASE DR.
City-St-Zip: WINTER SPRINGS, FL 32708

Title: VPD ( ) Delete
Name: FORD, WILLIAM J
Address: 101 SEVILLE CHASE DRIVE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: SD ( ) Delete
Name: KIRBY, DALE
Address: 122 SEVILLE CHASE DR
City-St-Zip: WINTER SPRINGS, FL 32708

Title: TD ( ) Delete
Name: WILLIS, STEPHEN
Address: 203 ALEGRE COURT
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D ( ) Delete
Name: SELDIN, JAN
Address: 207 ALEGRE CT
City-St-Zip: WINTER SPRINGS, FL 32708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: ANDREW SILVER PRES 04/01/2008
Electronic Signature of Signing Officer or Director — Date