

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 08, 2006 8:00 am
Secretary of State

03-08-2006 90176 028 ****61.25

DOCUMENT # 739604			
1. Entity Name THE ESTATES OF SILVERLAKE PROPERTY OWNERS' ASSOCIATION, INCORPORATED			
Principal Place of Business 2306 SW 23RD CRANBROOK DR. BOYNTON BEACH FL 33436		Mailing Address 2306 SW 23RD CRANBROOK DR. BOYNTON BEACH FL 33436	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



1st MOORE CR2E037 (10/05)

4. FEI Number 59-2286964		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent NOVITA, JACK 2668 S.W. 23RD CRANBROOK DR BOYNTON BEACH FL 33436-5704		7. Name and Address of New Registered Agent Name: LOUIS D'ANDREA Street Address (P.O. Box Number is Not Acceptable): 2730 SW 23RD CRANBROOK DRIVE City: BOYNTON BEACH FL Zip Code: 33436	

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: *Louis D'Andrea* DATE: **02/21/2006**

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering) DATE

FILE NOW: FEE IS \$61.25 Due By May 1, 2006	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
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10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NOVITA, JACK		NAME		
STREET ADDRESS	2668 S.W. 23RD CRANBROOK DR		STREET ADDRESS		
CITY-ST-ZIP	BOYNTON BEACH FL 33436		CITY-ST-ZIP		
TITLE	SD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STERN, NORMAN		NAME		
STREET ADDRESS	2543 SW 23RD CRANBROOK PL		STREET ADDRESS		
CITY-ST-ZIP	BOYNTON BEACH FL 33436		CITY-ST-ZIP		
TITLE	TD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COHEN, LEON		NAME		
STREET ADDRESS	2502 SW 23RD CRANBROOK DR		STREET ADDRESS		
CITY-ST-ZIP	BOYNTON BEACH FL 33436		CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROGERS, JOHN		NAME		
STREET ADDRESS	2713 SW 23RD CRANBROOK DR		STREET ADDRESS		
CITY-ST-ZIP	BOYNTON BEACH FL 33436		CITY-ST-ZIP		
TITLE	PD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D'ANDREA LOUIS		NAME		
STREET ADDRESS	2730 SW 23RD CRANBROOK DR		STREET ADDRESS		
CITY-ST-ZIP	BOYNTON BEACH FL 33436		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 exemptions contained in Section 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: *Louis D'Andrea* **02-20-06**