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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 758328

1. Corporation Name

SILK OAK LODGE MOBILE HOME OWNER'S ASSOCIATION, INC.

Principal Place of Business	Mailing Address
28488 U.S. HIGHWAY 19 NORTH. LOT #83 CLEARWATER FL 33761 GE MOBIL US HOME OWNERS ASSN., INC. President. E. Muldoon	28488 U.S. HIGHWAY 19 NORTH. LOT #83 CLEARWATER FL 33761 US

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 Country — 30

3. Date Incorporated or Qualified: 05/13/1981

4. FEI Number: 59-2093845 ☐ Applied For ☒ Not Applicable

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

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

9. Name and Address of Current Registered Agent

~~GREEN, LINDA SUZZANNE L~~
~~1455 COURT STREET~~
~~CLEARWATER FL 34616~~

No Current
David C. Levenreich
406 S. Prospect Ave
Clearwater, Fl 34616

10. Name and Address of New Registered Agent

81 Name: David C. Levenreich
82 Street Address (P.O. Box Number is Not Acceptable): 406 S. Prospect Ave
83 Note- lawyer hired recently due to legal problem-now settled
84 City: Clearwater FL 85 Zip Code: 34616

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the duties of Section 617.0503, Florida Statutes.

SIGNATURE: DAVID C. LEVENREICH, Registered Agen DATE
Signature of new registered agent (required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	RUEL GAREY		1.2 NAME		
STREET ADDRESS	28488 US 19 N LOT #170		1.3 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER FL 33761		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	RAY AUGUSTYNIAK		2.2 NAME		
STREET ADDRESS	28488 US 19 N LOT #61		2.3 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATERS FL 33761		2.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	RADLOFF, IDA		3.2 NAME		
STREET ADDRESS	28488 US HWY 19 N LOT 32		3.3 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER, FL 00000 33761		3.4 CITY-ST-ZIP		
TITLE	S	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	GREELEY, DORIS		4.2 NAME		
STREET ADDRESS	28488 US 19 N. LOT #140		4.3 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER FL 33761		4.4 CITY-ST-ZIP		
TITLE	VP	☐ DELETE	5.1 TITLE	VP	☐ Change ☐ Addition
NAME	MULDOON, EMMETT		5.2 NAME	Merry Cianciolo Lot #139	
STREET ADDRESS	28488 US 19 N. LOT #184		5.3 STREET ADDRESS	28488 US 19 N.	
CITY-ST-ZIP	CLEARWATER, FL 00000		5.4 CITY-ST-ZIP	Clearwater, Fl. 33761.	
TITLE		☐ DELETE	6.1 TITLE	Pres.	☐ Change ☐ Addition
NAME			6.2 NAME	Muldoon Emmett	
STREET ADDRESS			6.3 STREET ADDRESS	28488 U.S. 19 N. Lot #184	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	Clearwater, Fl. 33761	

CR2E037 (11/98)

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ~~Emmett Muldoon~~ EMMETT MULDOON Emmett Muldoon, President as of 1/14/99 727-791-2856
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #