

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000007899

FILED
Apr 09, 2003
Secretary of State

Entity Name: ENCLAVE AT SILVER OAK NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

8865 ENCLAVE CT.
SARASOTA, FL 34238

New Principal Place of Business:

8865 ENCLAVE COURT
SARASOTA, FL 34238

Current Mailing Address:

8865 ENCLAVE CT.
SARASOTA, FL 34238

New Mailing Address:

8865 ENCLAVE COURT
SARASOTA, FL 34238

FEI Number: 65-1051100

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REES, STEPHEN D ESQUIRE
2033 MAIN STREET
SARASOTA, FL 34237 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: DPT () Delete
Name: PERLEY, LYALL J JR
Address: 8865 ENCLAVE CT.
City-St-Zip: SARASOTA, FL 34238

Title: DV () Delete
Name: PHILLIPS, ROD E JR
Address: 535 BEACH RD
City-St-Zip: SARASOTA, FL 34242

Title: DS () Delete
Name: PHILLIPS, CHRISTY P
Address: 535 BEACH RD
City-St-Zip: SARASOTA, FL 34242

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: PERLEY, LYALL J JR
Address: 8865 ENCLAVE COURT
City-St-Zip: SARASOTA, FL 34238

Title: DV (X) Change () Addition
Name: PHILLIPS, ROD E JR
Address: 535 BEACH ROAD
City-St-Zip: SARASOTA, FL 34242

Title: DS (X) Change () Addition
Name: PHILLIPS, CHRISTY P
Address: 535 BEACH ROAD
City-St-Zip: SARASOTA, FL 34242

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LYALL PERLEY

DPT

04/09/2003

Electronic Signature of Signing Officer or Director

_____ Date