AMENDED

FILE NOW: FILING FEE IS $61.25

APPROVED AND FILED

98 SEP 28 AM 8:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NONPROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N37945

1. Corporation Name

Silver Glen Homeowners' Association, Inc.

Principal Place of Business	Mailing Address
668 N. Orlando Ave. Suite 105 Maitland, FL 32751	668 N. Orlando Ave. Suite 105 Maitland, FL 32751

3. Date Incorporated or Qualified: 5/2/1990

4. FEI Number: 59-3051306 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business (21) | 2a. Mailing Address (26)

Suite, Apt. #, etc (22) | Suite, Apt. #, etc. (27)

City & State (23) | City & State (28)

Zip (24) Country (25) | Zip (29) Country (30)

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

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

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

Morbitzer, Margaret L.
668 N. Orlando Ave., Ste. 105
Maitland, FL 32751

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

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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 obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☒ DELETE	1.1 TITLE	PD	☐ Change ☒ Addition
NAME	Myhre, Christina		1.2 NAME	Fredericksen, John	
STREET ADDRESS	341 Sterling Lake Drive		1.3 STREET ADDRESS	1719 Glenhaven Circle	
CITY-ST-ZIP	Ocoee, FL 34761		1.4 CITY-ST-ZIP	Ocoee, FL 34761	
TITLE	VPD	☒ DELETE	2.1 TITLE	VPD	☐ Change ☒ Addition
NAME	Coney, Richard		2.2 NAME	Bass, John	
STREET ADDRESS	339 Sterling Lake Drive		2.3 STREET ADDRESS	1727 Glenhaven Circle	
CITY-ST-ZIP	Ocoee, FL 34761		2.4 CITY-ST-ZIP	Ocoee, FL 34761	
TITLE	SD	☒ DELETE	3.1 TITLE	TD	☐ Change ☒ Addition
NAME	Borak, Robert		3.2 NAME	Mann, Danny	
STREET ADDRESS	321 Century Oaks Drive		3.3 STREET ADDRESS	1406 Chapel Ridge Drive	
CITY-ST-ZIP	Ocoee, FL 34761		3.4 CITY-ST-ZIP	Ocoee, FL 34761	
TITLE	TD	☒ DELETE	4.1 TITLE	SD	☐ Change ☒ Addition
NAME	Champagne, Linda		4.2 NAME	Chen, Dennis	
STREET ADDRESS	1601 Glenhaven Circle		4.3 STREET ADDRESS	1191 Vickers Lake Drive	
CITY-ST-ZIP	Ocoee, FL 34761		4.4 CITY-ST-ZIP	Ocoee, FL 34761	
TITLE	D	☒ DELETE	5.1 TITLE	D	☐ Change ☒ Addition
NAME	Barnette, Mike		5.2 NAME	Gaut, Dayna	
STREET ADDRESS	338 Sterling Lake Drive		5.3 STREET ADDRESS	308 Sterling Lake Drive	
CITY-ST-ZIP	Ocoee, FL 34761		5.4 CITY-ST-ZIP	Ocoee, FL 34761	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

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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.

407-578-6083

SIGNATURE: _____ JOHN FREDERICKSEN 8/29/98
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date