

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2001 8:00 am
Secretary of State

04-17-2001 90066 004 ****61.25

DOCUMENT # 739604

1. Entity Name

THE ESTATES OF SILVERLAKE PROPERTY OWNERS' ASOCI

Principal Place of Business

Mailing Address

2306 SW 23RD CRANBROOK DR.
 BOYNTON BEACH FL 33436

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

4. FEI Number

59-2286964

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

NOVITA, SUZANNE
 ESTATES OF SILVERLAKE
 2668 SW 23RD CRANBROOK DR
 BOYNTON BEACH FL 33436-5704

7. Name and Address of New Registered Agent

Name WILLIAM PLUM
 Street Address (P.O. Box Number is Not Acceptable)
ESTATES OF SILVERLAKE
2310 S.W. 23RD CRANBROOK DR.
 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.

SIGNATURE WILLIAM PLUM

Signature, typed or printed name of registered agent and title if applicable.

William H. Plum

(NOTE: Registered Agent signature required when reinstating)

03-04-01

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SUZANNE, NOVITA 2668 SW 23RD CRANBROOK DR BOYNTON BEACH FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S STONE, PATRICIA 2410 SW 23RD CRANBROOK DR BOYNTON BEACH FL 33436	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BESSELL, MICHAEL 2657 CRANBROOK DRIVE BOYNTON BCH FL 33436	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD STONE, CHARLES 2410 SW 23RD CRANBROOK DR BOYNTON BEACH FL 33436	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ROGERS, JOHN 2713 SW 23RD CRANBROOK DR BOYNTON BEACH FL 33436	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DELLISANTI, RICHARD 2408 SW 23RD CRANBROOK DR BOYNTON BEACH FL 33436	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WILLIAM PLUM 2310 S.W. 23RD CRANBROOK DRIVE BOYNTON BEACH, FL 33436	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MARY T. MILLS 2312 S.W. 23RD CRANBROOK DR BOYNTON BEACH, FL 33436	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 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 817, 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: MARY T. MILLS

TREASURER
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mary T. Mills

3/12/01

Date

(501) 775-9518

Daytime Phone #

CR2E037 (10/00)