

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Feb 05, 2005 08:00 AM
Secretary of State

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 SAME AS ABOVE		3. Mailing Address SAME AS ABOVE			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		4. FEI Number 59-2286964	
5. Certificate of Status Desired ☐		\$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 Street Address (P.O. Box Number is Not Acceptable) City	
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.				FL Zip Code	
SIGNATURE <i>[Signature]</i> Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)				DATE 1/28/05	
FILE NOW: FEE IS \$61.25 Due By May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD NOVITA, JACK 2668 S.W. 23RD CRANBROOK DR BOYNTON BEACH FL 33436		☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP		SD STERN, NORMAN 2543 SW 23RD CRANBROOK PL BOYNTON BEACH FL 33436		☐ Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TD COHEN, LEON 2502 SW 23RD CRANBROOK DR BOYNTON BEACH FL 33436		☐ Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		VP ROGERS, JOHN 2713 SW 23RD CRANBROOK DR BOYNTON BEACH FL 33436		☐ Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP				☐ Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP				☐ Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP				☐ Delete	
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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>[Signature]</i> 1/28/05 \$61843888					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					