

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739604

FILED
Jan 23, 2020
Secretary of State
8627119897CC**Entity Name:** THE ESTATES OF SILVERLAKE PROPERTY OWNERS'
ASSOCIATION, INCORPORATED**Current Principal Place of Business:**11784 WEST SAMPLE ROAD
SUITE 103
CORAL SPRINGS, FL 33065**Current Mailing Address:**11784 WEST SAMPLE ROAD
SUITE 103
CORAL SPRINGS, FL 33065 US**FEI Number:** 59-2286964**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WASSERSTEIN, P.A.
301 YAMATO ROAD
SUITE 2199
BOCA RATON, FL 33431 US*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:** WASSERSTEIN

01/23/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** DIRECTOR
Name PAYNER, REBECCA
Address 11784 WEST SAMPLE ROAD
SUITE 103
City-State-Zip: CORAL SPRINGS FL 33065**Title** SECRETARY
Name ZARRELLI, PATRICK
Address 11784 WEST SAMPLE ROAD
SUITE 103
City-State-Zip: CORAL SPRINGS FL 33065**Title** DIRECTOR
Name VAN DERHOOF, LIZ
Address 11784 WEST SAMPLE ROAD
SUITE 103
City-State-Zip: CORAL SPRINGS FL 33065**Title** DIRECTOR
Name MCILVAIN, DAVID
Address 11784 WEST SAMPLE ROAD
SUITE 103
City-State-Zip: CORAL SPRINGS FL 33065**Title** VP
Name WHITAKER, PETER
Address 11784 WEST SAMPLE ROAD
SUITE 103
City-State-Zip: CORAL SPRINGS FL 33065**Title** TREASURER
Name PISCO, KATARZYNA
Address 11784 WEST SAMPLE ROAD
SUITE 103
City-State-Zip: CORAL SPRINGS FL 33065**Title** PRESIDENT
Name DAVIDOW, JULIA
Address 11784 WEST SAMPLE ROAD
SUITE 103
City-State-Zip: CORAL SPRINGS FL 33065**Title** DIRECTOR
Name LAMASTER, DAVID
Address 11784 WEST SAMPLE ROAD
SUITE 103
City-State-Zip: CORAL SPRINGS FL 33065**Continues on page 2**

I hereby 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 all other like empowered.

SIGNATURE: DAVIDOW , JULIA

PRES

01/23/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	WALLACE, WILLIAM
Address	11784 WEST SAMPLE ROAD SUITE 103
City-State-Zip:	CORAL SPRINGS FL 33065