

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000136735

**Entity Name:** SILVER OAKS VILLAGE HOLDINGS, LLC

**Current Principal Place of Business:**

6272 ABBOTT STATION DR, #102  
ZEPHYRHILLS, FL 33542

**Current Mailing Address:**

6272 ABBOTT STATION DR, #102  
ZEPHYRHILLS, FL 33542 US

**FEI Number: 88-1596055**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

SMITH, LANCE A  
6272 ABBOTT STATION DR, #102  
ZEPHYRHILLS, FL 33542 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title AMBR  
Name SMITH, LANCE A  
Address 6272 ABBOTT STATION DR, #102  
City-State-Zip: ZEPHYRHILLS FL 33542

Title AMBR  
Name LEWIS, SHANNON M  
Address 6272 ABBOTT STATION DR, #102  
City-State-Zip: ZEPHYRHILLS FL 33542

Title AMBR  
Name AMLER, MYRA M  
Address 6272 ABBOTT STATION DR, #102  
City-State-Zip: ZEPHYRHIL FL 32536

Title AMBR  
Name LEWIS, CARLIE M.  
Address 6272 ABBOTT STATION DR, #102  
City-State-Zip: ZEPHYRHIL FL 32536

Title AUTHORIZED REPRESENTATIVE  
Name AMLER, ROY ERWIN  
Address 1809 CARMEL ROAD  
City-State-Zip: CHARLOTTE NC 28226

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: ROY E AMLER**

**AUTHORIZED  
REPRESENTATIVE**

**03/08/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date