

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90324 020 ****61.25

DOCUMENT # 730067

1. Entity Name

SILVER LAKES ACRES CHAPTER #1768 OF AMERICAN ASS

Principal Place of Business

**13300 E. RT. 40
 SILVER SPRINGS FL 34488**

Mailing Address

**13300 E. RT. 40
 SILVER SPRINGS FL 34488**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-7371223

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MILLS, RICHARD C.
 13300 E. RT. 40
 SILVER SPRINGS FL 34488**

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
 NAME CRICHTON, JEAN
 STREET ADDRESS 16858 SE 9TH ST
 CITY-ST-ZIP SILVER SPRINGS FL 34488 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VD
 NAME MILLS, RICHARD C
 STREET ADDRESS 13300 E RT 40
 CITY-ST-ZIP SILVER SPRINGS FL 34488 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S
 NAME HUNSICKER, OLIVE
 STREET ADDRESS 18648 SE 19 ST
 CITY-ST-ZIP SILVER SPRINGS FL ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☒ Addition
 add zip 34488

TITLE T
 NAME EASTMAN, HELEN E
 STREET ADDRESS 2000 SE 173RD CT
 CITY-ST-ZIP SILVER SPRINGS FL 34488 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
 NAME HILTS, HOLLY
 STREET ADDRESS 2420 SE 174TH COURT
 CITY-ST-ZIP SILVER SPRINGS FL ☒ Delete

TITLE D
 NAME Harrison, Evelyn
 STREET ADDRESS 1703 S.E. 183rd Terrace
 CITY-ST-ZIP Silver Springs, FL 34488 ☒ Change ☐ Addition

TITLE D
 NAME STEWART, THELMA H.
 STREET ADDRESS 1754 SE 169 TERR RD
 CITY-ST-ZIP SILVER SPRINGS, FL 00000 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☒ Addition
 Zip 34488

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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Helen E. Eastman* **Helen E. Eastman** 04-25-01 (352) 625-5212
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)