

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2006 8:00 am
Secretary of State

03-30-2006 90024 010 ****61.25

DOCUMENT # 732105

1. Entity Name
SILVER MOSS PROPERTY OWNERS' ASSOCIATION, INC.



Principal Place of Business
**1 TURTLE BEACH ROAD
VERO BEACH, FL 32963-3452**

Mailing Address
**1 TURTLE BEACH ROAD
VERO BEACH, FL 32963-3452**

60022867



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03012006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
59-1645195

Applied For
Not Applicable

Zip

Country

Zip

Country

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

**BARKER, JOHN E
1 TURTLE BEACH ROAD
VERO BCH, FL 32963**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

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 **VPT** ☒ Delete
NAME **FERRIS, MAURICE J**
STREET ADDRESS **203 SILVER MOSS DR**
CITY-ST-ZIP **VERO BEACH, FL 32963**

TITLE **VP** ☒ Change ☐ Addition
NAME **Moore, Mary Lilly Gold**
STREET ADDRESS **213 Silver Moss Dr**
CITY-ST-ZIP **Vero Beach, FL 32963**

TITLE **S** ☒ Delete
NAME **AHRENS, JOYCE**
STREET ADDRESS **142 SILVER MOSS DR**
CITY-ST-ZIP **VERO BEACH, FL 32963**

TITLE **ST** ☒ Change ☐ Addition
NAME **Dussing, Donald I.**
STREET ADDRESS **291 Silver Moss Dr**
CITY-ST-ZIP **Vero Beach, FL 32963**

TITLE **D** ☒ Delete
NAME **BOYD, HALLAM JR**
STREET ADDRESS **230 SHADY OAK DR**
CITY-ST-ZIP **VERO BEACH, FL 32963**

TITLE **D** ☒ Change ☐ Addition
NAME **Ferris, Maurice**
STREET ADDRESS **203 Silver Moss Dr**
CITY-ST-ZIP **Vero Beach, FL 32963**

TITLE **AS** ☐ Delete
NAME **BARKER, JOHN**
STREET ADDRESS **1 TURTLE BEACH ROAD**
CITY-ST-ZIP **VERO BEACH, FL 32963**

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

TITLE **D** ☒ Delete
NAME **SHAKER, THEODORE F**
STREET ADDRESS **243 SILVER MOSS DR**
CITY-ST-ZIP **VERO BEACH, FL 32963**

TITLE **D** ☒ Change ☐ Addition
NAME **Crawford, James L.**
STREET ADDRESS **211 Shady Oak Lane**
CITY-ST-ZIP **Vero Beach, FL 32963**

TITLE **PD** ☒ Delete
NAME **HUTCHINSON, WILLIAM K.**
STREET ADDRESS **383 SILVER MOSS DR**
CITY-ST-ZIP **VERO BEACH, FL 32963**

TITLE **PD** ☒ Change ☐ Addition
NAME **Hayne, Thomas A.**
STREET ADDRESS **210 Shady Oak Lane**
CITY-ST-ZIP **Vero Beach FL 32963**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 to an address with all other like empowered.

SIGNATURE:

John E. Barker

3/31/06

772-231-1666

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #