


FILE NOW: FILING FEE IS \$61.25

FILED
Mar 29, 1999 8:00 am
Secretary of State

03-29-1999 90092 033 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 739744					
1. Corporation Name SILVER LAKE ASSOCIATION, INC.					
Principal Place of Business 34220 SILVER CT LEESBURG FL 34788 US			Mailing Address 34220 SILVER CT LEESBURG FL 34788 US		



2. Principal Place of Business 21 Suite, Apt. #, etc. 23 City & State 24 Zip 25 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 07/27/1977	
		4. FEI Number 59-1821692		Applied For <input type="checkbox"/> Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent SELLAR, CHARLES B. P. 9013 SILVER LAKE DR. LEESBURG FL 34788				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
--	--	--	--	---	--

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent; or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WETTENGEL, KATY	1.2 NAME	
STREET ADDRESS	34220 SILVER CT	1.3 STREET ADDRESS	
CITY-ST-ZIP	LEESBURG FL	1.4 CITY-ST-ZIP	
TITLE	S <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCOTT, ROY	2.2 NAME	SANDY WESTON
STREET ADDRESS	33416 FAIRWAY DR	2.3 STREET ADDRESS	9461 SILVER LAKE DR.
CITY-ST-ZIP	LEESBURG FL	2.4 CITY-ST-ZIP	LEESBURG, FL 34788
TITLE	VP <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAKER, BRUCE	3.2 NAME	DON LAYDEN
STREET ADDRESS	32902 INDIAN WOOD DR	3.3 STREET ADDRESS	34139 RADIO RD.
CITY-ST-ZIP	LEESBURG FL	3.4 CITY-ST-ZIP	LEESBURG, FL 34788
TITLE	T <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ACKERMAN, AUDREY	4.2 NAME	PERRY MITCHELL
STREET ADDRESS	33930 HIGHLAND RD	4.3 STREET ADDRESS	33348 GREEN RD.
CITY-ST-ZIP	LEESBURG FL 34788	4.4 CITY-ST-ZIP	LEESBURG, FL 34788
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARTIN, VERA	5.2 NAME	
STREET ADDRESS	9371 SILVER LAKE DR	5.3 STREET ADDRESS	
CITY-ST-ZIP	LEESBURG FL 34788	5.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LLOYD, CHARLIE T	6.2 NAME	JOHN PRUDHOMME
STREET ADDRESS	33926 SABAL WAY	6.3 STREET ADDRESS	33214 FAIRWAY RD
CITY-ST-ZIP	LEESBURG FL	6.4 CITY-ST-ZIP	LEESBURG, FL 34788

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **WETTENGEL, KATY** **APR 25 1999** **352-781-8081**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #