

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 755547 (7)

1. Corporation Name

SILK OAK CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

C/O EL CON REALTY
SUITE 22
BRADENTON FL 34210
US

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SUITE 22
BRADENTON FL 34210
US

FILED
Sep 30 1998 8:00am
Secretary of State



3. Date Incorporated or Qualified

12/16/1980

4. FEI Number

59-2221416

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☒ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

PYLE, HERSHAL
4400 EL CONQUISTADOR PKWY
BRADENTON FL 34210

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME SCHROER, RALPH
STREET ADDRESS 120 53RD AVENUE W.
CITY-ST-ZIP BRADENTON FL

TITLE V ☒ DELETE

NAME CARLOCK JUDITH
STREET ADDRESS 4602 34TH AVE DRIVE WEST
CITY-ST-ZIP BRADENTON FL

TITLE PD ☒ DELETE

NAME ABRAHAM, GEORGE
STREET ADDRESS 1302 WHITFIELD
CITY-ST-ZIP SARASOTA FL

TITLE TS ☐ DELETE

NAME FRANCO, HELENE
STREET ADDRESS 1212 44TH ST W
CITY-ST-ZIP BRADENTON FL

TITLE D ☐ DELETE

NAME YECK, SUSAN
STREET ADDRESS 2418 36TH AVE WEST
CITY-ST-ZIP BRADENTON FL

TITLE D ☐ DELETE

NAME ARD, ALINE
STREET ADDRESS 2422 36TH AVE WEST
CITY-ST-ZIP BRADENTON FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE VICE PRESIDENT ☒ Change ☐ Addition

2.2 NAME John Carlock
2.3 STREET ADDRESS 4602 34th Ave Dr. W.
2.4 CITY-ST-ZIP Bradenton FL

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(l), 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/98)