

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 758328

1. Entity Name

SILK OAK LODGE MOBILE HOME OWNER'S ASSOCIATION.

FILED

Jan 31, 2000 8:00 am
Secretary of State

01-31-2000 90003 013 ****61.25

Principal Place of Business Mailing Address
28488 U.S. HIGHWAY 19 NORTH. LOT #83 28488 U.S. HIGHWAY 19 NORTH. LOT #83
CLEARWATER FL 33761 CLEARWATER FL 33761-2523
US US

2. Principal Place of Business
As Above

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2093845

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

LAVENREICH, DAVID C
406 S PROSPECT AVE
CLEARWATER FL 34616

7. Name and Address of New Registered Agent

Name Herome Cianciolo (New Pres.)
Street Address (P.O. Box Number is Not Acceptable) 28488 US 19 N Lot 25
City Clearwater FL Zip Code 33761

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 Emmett Muldoon 1/22/20
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

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	RUEL GAREY	
STREET ADDRESS	28488 US 19 N LOT #170	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	RAY AUGUSTYNAK	
STREET ADDRESS	28488 US 19 N LOT #61	
CITY-ST-ZIP	CLEARWATERS FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	RADLOFF, IDA	
STREET ADDRESS	28488 US HWY 19 N LOT 32	
CITY-ST-ZIP	CLEARWATER, FL 00000	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	GREELEY, DORIS	
STREET ADDRESS	28488 US 19 N. LOT #140	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	V.P.	<input checked="" type="checkbox"/> Delete
NAME	MULDOON, EMMETT	
STREET ADDRESS	28488 US 19 N. LOT #184	
CITY-ST-ZIP	CLEARWATER, FL 00000	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Ray Augustyniak	
STREET ADDRESS	28488 US 19 N. LOT #1	
CITY-ST-ZIP	CLEARWATER FL 33761	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Nelson Hatfield	
STREET ADDRESS	28488 US 19 N Lot	
CITY-ST-ZIP	CLEARWATER FL 33761	
TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Ida Radloff	
STREET ADDRESS	28488 US 19 N LOT 32	
CITY-ST-ZIP	CLEARWATER, FL 33761	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Shirley DeWald	
STREET ADDRESS	28488 US 19 N. LOT 155	
CITY-ST-ZIP		
TITLE	T.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Lume Donnelly	
STREET ADDRESS	28488 U.S. 19 N LOT 52	
CITY-ST-ZIP	CLEARWATER FL 33761	
TITLE	V.P.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Lame Hopkins	
STREET ADDRESS	28488 U.S. 19 N. LOT 97	
CITY-ST-ZIP		
TITLE	P.	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Lerry Cianciolo	
STREET ADDRESS	28488 US 19 N LOT 25	
CITY-ST-ZIP		

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: Emmett Muldoon Emmett Muldoon - President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)