

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 758328

1. Entity Name

SILK OAK LODGE MOBILE HOME OWNER'S ASSOCIATION,

FILED
Mar 12, 2001 8:00 am
Secretary of State

03-12-2001 90426 028 ****61.25

Principal Place of Business

28488 U.S. HIGHWAY 19 NORTH, LOT #83
CLEARWATER FL 33761
US

Mailing Address

28488 U.S. HIGHWAY 19 NORTH, LOT #83
CLEARWATER FL 33761
US

2. Principal Place of Business

3. Mailing Address

28488 US 19N

Suite, Apt. #, etc.

Suite, Apt. #, etc.

LOT 52

City & State

City & State
Clearwater FL.

Zip

Country

Zip
33761

Country
Pinellas

4. FEI Number

59-2093845

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CIANCIOLO
CIANICOLA, JEROME
28488 US 19N LOT 25
CLEARWATER FL 33761

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

3-6-2001

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
NAME
STREET ADDRESS
CITY-ST-ZIP
D AUGUSTYNIAK
AUGUSTINE, RAY
28488 US 19N., LOT 25
CLEARWATER FL 33761 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D HATFIELD, NELSON
2848 US 19N., LOT
CLEARWATER FL 33761 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D RADLOFF, IDA
28488 US HWY 19 N, LOT 32
CLEARWATER FL 33761 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S DEWALD, SHIRLEY
28488 US 19N., LOT 155
CLEARWATER FL ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T DONNELLY, JUNE
28488 US 19N., LOT 52
CLEARWATER FL 33761 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
HOPKINS, JAMES
28488 US 19N., LOT 97
CLEARWATER FL ☒ Delete

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

727
3-6-2001 7240380

CR2E037 (10/00)