

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2004 8:00 am
Secretary of State

04-22-2004 90035 011 ****61.25

DOCUMENT # 758328 1. Entity Name SILK OAK LODGE MOBILE HOME OWNER'S ASSOCIATION, INC.					
Principal Place of Business 28488 U.S. HIGHWAY 19 NORTH CLEARWATER, FL 33761 US			Mailing Address 28488 U.S. HIGHWAY 19 NORTH LOT #63 CLEARWATER, FL 33761 US		
2. Principal Place of Business 28488 US HWY 19N Suite, Apt. #, etc.		3. Mailing Address 28488 US HWY 19N Suite, Apt. #, etc. LOT 63			
City & State CLEARWATER FL		City & State CLEARWATER FL		4. FEI Number 59-2093845	
Zip 33761		Country US		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CIANCIOLO, JEROME 28488 US 19N LOT 25 CLEARWATER, FL 33761				7. Name and Address of New Registered Agent Name DELANEY MICHELINE Street Address (P.O. Box Number is Not Acceptable) 28488 US HWY 19N LOT 490 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Michelle Delaney</u> DATE <u>4/19/04</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 NAME STREET ADDRESS CITY-ST-ZIP	D DEITSCHER, JAMES 28488 US 19 N #96 CLEARWATER, FL 33761	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN BETTY 28488 US HWY 19N LOT 59 CLEARWATER FL 33761	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, BETTY 28488 US 19N #54 CLEARWATER, FL 33761	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREGG DORIS 28488 US HWY 19N LOT 140 CLEARWATER FL 33761	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NAPPENBACH, KENNETH 28488 US 19 N #175 CLEARWATER, FL 33761	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AUGUSTYNIAK-RAY 28488 US HWY 19N LOT 61 CLEARWATER FL 33761	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HALL, ELIZABETH 28488 US 19 N #72 CLEARWATER, FL 33761	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V VOGEL STEVEN 28488 US HWY 19N LOT 35 CLEARWATER FL 33761	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HALL, ALLAN 28488 US 19 N #3 CLEARWATER, FL 33761	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RAHN LINDA 28488 US HWY 19N LOT 100 CLEARWATER FL 33761	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CIANCIOLO, JEROME 28488 US 19 N #25 CLEARWATER, FL 33761	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DELANEY MICHELINE 28488 US HWY 19N LOT 90 CLEARWATER FL 33761	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> 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: <u>Michelle Delaney</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <u>4-19-04</u> Daytime Phone # <u>796-0475</u>		