

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 11 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F94000004256 (3)

1. Corporation Name

SILVERWOOD DEVELOPMENT CORPORATION



Principal Place of Business

101 LAKEVIEW DR.
MORGANTOWN WV 26505

Mailing Address

801 UNO LAGO DRIVE
JUNO BEACH FL 33408
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 801 UNO LAGO DR		26 Suite, Apt. #, etc.		08/17/1994	
22 City & State		27 City & State		4. FEI Number	
23 JUNO BEACH FL		28 City & State		512-1681573	
24 Zip		29 Zip		5. Certificate of Status Desired	
33408		30 Country		6. Election Campaign Financing	
25 USA		31 Country		Trust Fund Contribution	
26		32		8. This corporation owes or has paid the current year Intangible	
27		33		Personal Property Tax due June 30.	
28		34		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
29		35		7. Additional Fee Required	
30		36		\$8.75	
31		37		\$5.00	
32		38		May Be Added to Fees	
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9. Name and Address of Current Registered Agent

SOLOMON II, J C
801 UNO LAGO DR
JUNO BEACH FL 33408

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, 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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SOLOMON, J C II	1.2 NAME	
STREET ADDRESS	801 UNO LAGO DR	1.3 STREET ADDRESS	
CITY-ST-ZIP	JUNO BEACH FL 33408	1.4 CITY-ST-ZIP	
TITLE	VST	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRAZIOTTO, RAYMOND E	2.2 NAME	
STREET ADDRESS	801 UNO LAGO DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	JUNO BEACH FL 33408	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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)(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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or an attachment with an address.

SIGNATURE

11/29/98

CR2E034 (10/97)