

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000001020

1. Entity Name

SILVERLAKE DEVELOPMENT CORPORATION

**FILED**  
**Feb 29, 2000 8:00 am**  
**Secretary of State**

02-29-2000 90099 012 \*\*\*150.00

Principal Place of Business

Mailing Address

1415 FOULK RD., STE 205  
WILMINGTON DE 19803

1415 FOULK RD., STE 205  
WILMINGTON DE 19810

2. Principal Place of Business

3411 Silverside Road

Suite, Apt. #, etc.

100 Hagley Building

City & State

Wilmington, DE

Zip

19810

Country

New Castle

3. Mailing Address

3411 Silverside Road

Suite, Apt. #, etc.

100 Hagley Building

City & State

Wilmington, DE

Zip

19810

Country

New Castle



DO NOT WRITE IN THIS SPACE

4. FEI Number

51-0334711

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

7. Name and Address of New Registered Agent

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

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	CPD	<input type="checkbox"/> Delete
NAME	ROTHMAN, ROBERT	
STREET ADDRESS	100 N. TAMPA STREET, STE 3675	
CITY-ST-ZIP	TAMPA FL 33602	
TITLE	EVPD	<input type="checkbox"/> Delete
NAME	BUCHANAN, KIM P	
STREET ADDRESS	100 N. TAMPA STREET, STE 3675	
CITY-ST-ZIP	TAMPA FL 33602	
TITLE	SVPT.	<input type="checkbox"/> Delete
NAME	GARTHWAITE, JOHN R	
STREET ADDRESS	100 N. TAMPA STREET, STE 3675	
CITY-ST-ZIP	TAMPA FL 33602	
TITLE	SVP	<input type="checkbox"/> Delete
NAME	BEALE, CHARLES L	
STREET ADDRESS	100 N. TAMPA ST., SUITE 3675	
CITY-ST-ZIP	TAMPA FL 33602	
TITLE	VP	<input type="checkbox"/> Delete
NAME	SCAGLIONE, LEONARD	
STREET ADDRESS	1245 DEER VALLY DR., SUITE 3B	
CITY-ST-ZIP	PARK CITY UT 84060	
TITLE	VPS	<input type="checkbox"/> Delete
NAME	VOSS, DEANNA	
STREET ADDRESS	1415 FOULK ROAD, STE 205	
CITY-ST-ZIP	WILMINGTON DE 19803	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	3411 Silverside Road, 100 Hagley Building
CITY-ST-ZIP	Wilmington, DE 19810

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 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

Deanna Voss

2/1/00

302/479-4650

Date

Daytime Phone #

CR2E034 (9/99)