

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000001020

1. Entity Name
SILVERLAKE DEVELOPMENT CORPORATION

FILED
Jan 29, 2001 8:00 am
Secretary of State

01-29-2001 90060 046 ***150.00

Principal Place of Business

Mailing Address

**3411 SILVERSIDE ROAD
100 HAGLEY BUILDING
WILMINGTON DE 19810**

**3411 SILVERSIDE ROAD
100 HAGLEY BUILDING
WILMINGTON DE 19810**

2. Principal Place of Business

3505 Silverside Road

3. Mailing Address

3505 Silverside Road

Suite, Apt. #, etc.

206 Plaza Centre Building

Suite, Apt. #, etc.

206 Plaza Centre Building

City & State

Wilmington, DE

City & State

Wilmington, DE

4. FEI Number **51-0334711**

Applied For

Not Applicable

Zip

19810

Country

New Castle

Zip

19810

Country

New Castle

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CPD
ROTHMAN, ROBERT
100 N. TAMPA STREET, STE 3675
TAMPA FL 33602** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**EVPD
BUCHANAN, KIM P
100 N. TAMPA STREET, STE 3675
TAMPA FL 33602** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SVPT
GARTHWAITE, JOHN R
100 N. TAMPA STREET, STE 3675
TAMPA FL 33602** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SVP
BEALE, CHARLES L
100 N. TAMPA ST., SUITE 3675
TAMPA FL 33602** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
SCAGLIONE, LEONARD
1245 DEER VALLY DR., SUITE 3B
PARK CITY UT 84060** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPS
VOSS, DEANNA
1415 FOULK ROAD, STE 205
WILMINGTON DE 19803** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
**3505 Silverside Rd., 206 Plaza Centre Bldg.
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

1/8/01

Date

302-479-4650

Daytime Phone #

CR2E034 (10/00)