

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 23, 2002 8:00 am
Secretary of State

07-23-2002 90335 043 ***550.00

DOCUMENT # F98000001020

1. Entity Name
SILVERLAKE DEVELOPMENT CORPORATION

Principal Place of Business
3505 SILVERSIDE RD
206 PLAZA CENTRE BLDG
WILMINGTON DE 19810

Mailing Address
3505 SILVERSIDE RD
206 PLAZA CENTRE BLDG
WILMINGTON DE 19810

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

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

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 CPD ☐ Delete
NAME ROTHMAN, ROBERT
STREET ADDRESS 100 N. TAMPA STREET, STE 3675
CITY-ST-ZIP TAMPA FL 33602

TITLE CCEOD ☒ Change ☐ Addition
NAME ROTHMAN, ROBERT
STREET ADDRESS 100 N. TAMPA STREET, STE 3675
CITY-ST-ZIP TAMPA, FL 33602

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

TITLE PTD ☒ Change ☐ Addition
NAME BUCHANAN, KIM P.
STREET ADDRESS 100 N. TAMPA STREET, STE 3675
CITY-ST-ZIP TAMPA, FL 33602

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

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

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

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

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

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

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

TITLE VPS ☒ Change ☐ Addition
NAME VOSS, DEANNA
STREET ADDRESS 3505 SILVERSIDE ROAD, 206 PLAZA CENTRE
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:

Deanna Voss VP and Secretary

7/8/09

(302) 479-4652

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/02)