

# **2009 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# K48178

**FILED**  
**Nov 16, 2009**  
**Secretary of State**

**Entity Name:** SILVER LAKE PLAZA, INC.

**Current Principal Place of Business:**

8405 N HIMES AVENUE  
TAMPA, FL 33614 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 18044  
TAMPA, FL 33679

**New Mailing Address:**

**FEI Number:** 65-0099247

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SAMHAT, HAROLD S  
8140 MANASOTA KEY RD  
ENGLEWOOD, FL 34223 US

**Name and Address of New Registered Agent:**

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:** HAROLD S. SAMHAT

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** D ( ) Delete  
**Name:** KING, THOMAS E  
**Address:** 305 BARCLAY CIR, STE 1000  
**City-St-Zip:** ROCHESTER HILLS, MI 48307

**Title:** PD ( ) Delete  
**Name:** SAMHAT, HAROLD S  
**Address:** 267 WOODBERRY DR  
**City-St-Zip:** BLOOMFIELD HILLS, MI

**Title:** D ( ) Delete  
**Name:** YOUNG, RODGER D  
**Address:** 26200 AMERICAN DR STE 305  
**City-St-Zip:** SOUTHFIELD, MI 48034

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** HAROLD S. SAMHAT

PD

11/16/2009

Electronic Signature of Signing Officer or Director

Date