

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L66316 (5)

1. Corporation Name

SILVER RIVER INVESTMENTS, INC.

Principal Place of Business

P. O. BOX 276
OCKLAWAHA FL 32179

Mailing Address

16784 SE 63RD LN
OCKLAWAHA FL 32179
US



2. Principal Place of Business

2a. Mailing Address

26 237 S.W. Kings Bay Drive
Suite, Apt. #, etc.

27 City & State

28 Crystal River, FL
City & State

29 34429
Zip

30 Country

3. Date Incorporated or Qualified

04/18/1990

3a. Date of Last Report

04/04/1995

4. FEI Number

59-3014608

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

YOUNGKIN, PAUL
18115 SE 95TH ST. RD.
OCKLAWAHA FL 32179

10. Name and Address of New Registered Agent

81 Name Timothy A. Brant

82 Street Address (P.O. Box Number is Not Acceptable)
237 S.W. Kings Bay Drive

83

84 City Crystal River

FL

85 Zip Code
34429

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

Timothy A. Brant

(If the Registered Agent's signature is required, attach a copy)

4-15-96

12. OFFICERS AND DIRECTORS

TITLE C
NAME BRANT, TIM
STREET ADDRESS 237 SW KINGS BAY DR.
CITY-ST-ZIP CRYSTAL RIVER FL
☐ DELETE

TITLE V
NAME BRANT, KAY
STREET ADDRESS 237 SW KINGS BAY DR.
CITY-ST-ZIP CRYSTAL RIVER FL
☐ DELETE

TITLE ST
NAME KIKENDALL, BETTY R
STREET ADDRESS 16784 SE 63RD LN
CITY-ST-ZIP OCKLAWAHA FL
☐ DELETE

TITLE P
NAME YOUNGKIN, PAUL
STREET ADDRESS RT. 3 BOX 579
CITY-ST-ZIP OCKLAWAHA FL
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
☒ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
☐ Change ☐ Addition

7.1 TITLE
7.2 NAME
7.3 STREET ADDRESS
7.4 CITY-ST-ZIP
☐ Change ☐ Addition

8.1 TITLE
8.2 NAME
8.3 STREET ADDRESS
8.4 CITY-ST-ZIP
☐ Change ☐ Addition

9.1 TITLE
9.2 NAME
9.3 STREET ADDRESS
9.4 CITY-ST-ZIP
☐ Change ☐ Addition

10.1 TITLE
10.2 NAME
10.3 STREET ADDRESS
10.4 CITY-ST-ZIP
☐ Change ☐ Addition

11.1 TITLE
11.2 NAME
11.3 STREET ADDRESS
11.4 CITY-ST-ZIP
☐ Change ☐ Addition

12.1 TITLE
12.2 NAME
12.3 STREET ADDRESS
12.4 CITY-ST-ZIP
☐ Change ☐ Addition

13.1 TITLE
13.2 NAME
13.3 STREET ADDRESS
13.4 CITY-ST-ZIP
☐ Change ☐ Addition

14.1 TITLE
14.2 NAME
14.3 STREET ADDRESS
14.4 CITY-ST-ZIP
☐ Change ☐ Addition

15.1 TITLE
15.2 NAME
15.3 STREET ADDRESS
15.4 CITY-ST-ZIP
☐ Change ☐ Addition

16.1 TITLE
16.2 NAME
16.3 STREET ADDRESS
16.4 CITY-ST-ZIP
☐ Change ☐ Addition

17.1 TITLE
17.2 NAME
17.3 STREET ADDRESS
17.4 CITY-ST-ZIP
☐ Change ☐ Addition

18.1 TITLE
18.2 NAME
18.3 STREET ADDRESS
18.4 CITY-ST-ZIP
☐ Change ☐ Addition

19.1 TITLE
19.2 NAME
19.3 STREET ADDRESS
19.4 CITY-ST-ZIP
☐ Change ☐ Addition

20.1 TITLE
20.2 NAME
20.3 STREET ADDRESS
20.4 CITY-ST-ZIP
☐ Change ☐ Addition

21.1 TITLE
21.2 NAME
21.3 STREET ADDRESS
21.4 CITY-ST-ZIP
☐ Change ☐ Addition

22.1 TITLE
22.2 NAME
22.3 STREET ADDRESS
22.4 CITY-ST-ZIP
☐ Change ☐ Addition

SIGNATURE: Timothy A. Brant Timothy A. Brant

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-96

352-563-5849

CR2E034 (12/95)