

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002792

FILED  
Mar 10, 2009  
Secretary of State

**Entity Name:** SILVER LEAF PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

5322 SILVERLEAF LANE  
SARASOTA, FL 34233

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 18027  
SARASOTA, FL 34276

**New Mailing Address:**

**FEI Number:** 20-1843504

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EDWARDS, SHERYL A ESQUIRE  
1515 RINGLING BLVD., STE. 840  
SARASOTA, FL 34236 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: WINTERROWD, DAVID  
Address: 5322 SILVERLEAF LANE  
City-St-Zip: SARASOTA, FL 34233

Title: D ( ) Delete  
Name: WINTERROWD, JASON  
Address: 5352 SILVERLEAF LANE  
City-St-Zip: SARASOTA, FL 34233

Title: D ( ) Delete  
Name: MONTGOMERY, ROBERT  
Address: 5332 SILVERLEAF LANE  
City-St-Zip: SARASOTA, FL 34233

**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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID WINTERROWD

D

03/10/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date