

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 19, 2005 08:00 AM
Secretary of State**

DOCUMENT # N04200

1. Entity Name
THE SILVERBELL ASSOCIATION, INC.



Principal Place of Business
**4418 GLENN'S LANDING
WINTER HAVEN, FL 33884**

Mailing Address
**4418 GLENN'S LANDING
WINTER HAVEN, FL 33884**



03042005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2431022 ☒ Applied For
☐ Not Applicable
5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

5. Name and Address of Current Registered Agent

**RICHARDSON, KAREN
4418 GLENN'S LANDING
WINTER HAVEN, FL 33884**

**DO NOT WRITE
IN THIS SPACE**

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

Karen Richardson

(NOTE: Registered Agent signature required when reinstating)

4/15/05
DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	T
NAME	RICHARDSON, KAREN
STREET ADDRESS	4418 GLENN'S LANDING
CITY-ST-ZIP	WINTER HAVEN, FL 33884
TITLE	P
NAME	CAULDWELL, J. CHRISTOPHER
STREET ADDRESS	809 ORCHID SPRINGS DRIVE
CITY-ST-ZIP	WINTER HAVEN, FL 33884
TITLE	S
NAME	BRANTLEY, RUSSELL
STREET ADDRESS	805 ORCHID SPRINGS DRIVE
CITY-ST-ZIP	WINTER HAVEN, FL 33884

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04/19/05-80037-014 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 617, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Karen Richardson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/05 (863) 318-1408
DATE Daytime Phone #