#### 2007 NOT-FOR-PROFIT CORPORATION

### ANNUAL REPORT **DOCUMENT # N17860** SILVER LAKES WEST HOMEOWNERS ASSOCIATION,

Principal Place of Business 2180 WEST SR 434

**SUITE 5000** LONGWOOD, FL 32779-5004 Mailing Address 2180 WEST SR 434 **SUITE 5000** LONGWOOD, FL 32779-5004

40000011

## **FILED** Apr 26, 2007 8:00 am Secretary of State

04-26-2007 90210 012 \*\*\*\*61.25

LONGWOOD, FL 32779-	5004	SUITE 5000 LONGWOOD, FL 32779-5004							
2. Principal Place of Business - No P.O. Box #		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			03282007 Chg-NP	CR2E	.037 (12/	/06)	
City & State		City & State		4. FEI Number					
				59-2877232			Not Applicable		
Zip	Country	Zip	Cou	untry	5. Certificate of Status Desired			5 Additional equired	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
HART, JAMES W JE	₹			Name					
SENTRY MANAGEM 2180 WEST SR., 43	MENT INC. 4 STE 5000			Street Address (P.O. Box Number is Not Acceptable)					
LONGWOOD, FL 3	2779-5004								
				City		F	L Zir	o Code	
<ol><li>The above named entit the obligations of regis</li></ol>	,	for the purpose of changi	ing its register	ed office or rec	gistered agent, or both, in the State of	Florida. I ai	n familiar	r with, and accept	

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)									
	Filing Fee is \$61.25  Due by May 1, 2007  9. Election Carm Trust Fund Co		~ _ <b>\u0.00</b> may be			Make check payable to Florida Department of State			
10.	OFFICERS AND DIRECTORS		11.	ADDITION	S/CHANGES TO	OFFICERS AND DIRECTORS	IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BONCK, LIONEL 919 SILVERTON LP LAKE MARY, FL 32746	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HILINSKI, TOM 852 SILVERSM LAKE MARY FL		☐ Chang	e 🔼 Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MOORE, KATHY 893 SILVERSMITH CIR LAKE MARY, FL 32746	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REEDY, JODI 800 SILVERSM LAKE MARY FL		☐ Chan	e 🔀 Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SMITH, DELLA 801 SILVERSMITH CIR LAKE MARY, FL 32746	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCDONALD, S 971 SILVERTO LAKE MARY FL	N LP	☐ Chan	e 🔀 Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD VERITY, JOHN 972 SILVERTON LP LAKE MARY, FL 32746	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VERITY, JOHN 972 SILVERTO LAKE MARY FL		<b>Æ</b> Chang	e Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILKINS, KENT 740 SILVERSMITH CIR LAKE MARY, FL 32746	<b>∑</b> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D' GWYNN, ANDR 913 STILLWELI LAKE MARY FL	_ LN	☐ Chang	e 🔀 Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BONCK, LINDA 919 SILVERTON LP LAKE MARY, FL 32746	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>T</b> BONCK, LINDA 919 SILVERTO LAKE MARY FL	N LP	<b>⊠</b> Chang	e		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 will an address, with all offer like empowered.

SIGNATURE:

NOTIN SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

407-322-4379

## ATTACHMENT 40083515

# SILVER LAKES WEST HOMEOWNERS ASSOCIATION, INC. DOCUMENT # N17860

#### OFFICERS AND DIRECTORS CONT...

D NYENHUIS, ROBERT 904 SILVERSMITH CIR LAKE MARY FL 32746-4914