2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N38981

1. Entity Name
SILVER OAKS VILLAGE HOMEOWNER'S ASSOCIATION,
INC.



FILED May 02, 2005 8:00 am Secretary of State 05-02-2005 90500 037 ****61.25

Principal Place of Business C/O PEGASUS 17595 S TAMIAMI TRAIL @100 FORT MYERS, FL 33908				Mailing Address C/O PEGASUS 17595 S TAMIAMI TRAIL @100 FORT MYERS, FL 33908				: ::::::::::::::::::::::::::::::::::::				SI 81 1891
2. Principal Place of Business 3.				3. Mailing Address								
Suite, Apt. #, etc.				Suite, Apt. #, etc.				03022005 Chg-NP CR2E037 (10/03)				
City & State			City & State					4. FEI Number Applied For 65-0250956 Not Applicable				
Zip	Zip Country			Zip Cour			5. Certificate of Status Desired					
6. Name and Address of Current R				d Agent			7. Name and Address of New Registered Agent					
STILSON, 17595 S TA STE 100 FORT MYE		Name Street Address			(P.O. Box Number is Not Acceptable)							
				City			FL				Zip Code	,
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE												
Filing Fee is \$61.25 Due by May 1, 2005				Election Campaign Financing Trust Fund Contribution.				\$5.00 May Be Added to Fees Make check payable to Florida Department of State				
10.		OFFICERS AND DI	RECTORS				/	ADDITIONS/CHANG	ES TO OFFICER	S AND DIRE	CTORS IN	10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	19337 SIL	PD BECTEL, MAURIE 19337 SILVER OAKS DRIVE FORT MYERS, FL 33912					☐ Change [☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD BOOTHE, BOB 19379 SILVER OAKS DR. FORT MYERS, FL 33912			Delete		E IE EET ADORESS '-ST-ZIP	1940	NDERS, FAI PU SILVER I	daks dr		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAWKINS, JIM 19508 SILVER OAKS DR. FORT MYERS, FL 33912			☐ Delete			PD				X Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT SIMONS, GARY 14545 SILVER OAKS DRIVE FORT MYERS, FL 33912						1935	LIAMS, TOM 54 SILVER DAKS DRIVE MYERS, FL 33912			Change	Addition
TIFLE NAME STREET ADDRESS CITY-ST-ZIP	D TALIAFERRO, RICK 19385 SILVER OAKS DRIVE FORT MYERS, FL 33912			NAM STRE		E SE SET ADDRESS (-ST-ZIP					Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	14484 SII FORT MY	SD DE JEU, JANET 14484 SILVER OAKS DRIVE FORT MYERS, FL 33912			CITY	NE EET ADDRESS 7-ST-ZIP	ted in Sa	potion 110 07/21/ii El	orida Statutan I		Change	Addition

2. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 eath; 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Les 239.481-E

Daytime Phone