FILE NOW: FILING FEE IS $61.25

FILED
Mar 22, 1999 8:00 am
Secretary of State
03-22-1999 90056 013 ****70.00

NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

247636 - 90056 - 13

DOCUMENT # N41040

1. Corporation Name
SILVER LAKES OF LAKELAND HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
146 HORIZON COURT LAKELAND FL 33813	146 HORIZON COURT LAKELAND FL 33813

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualifed
21 7628 N 56TH STREET	26 7628 N. 56TH STREET	11/13/1990
Suite, Apt. #, etc. 22 SUITE 8	Suite, Apt. #, etc. 27 SUITE 8	4. FEI Number 59-3082153 ☐ Applied For ☐ Not Applicable
City & State 23 TAMPA, FL	City & State 28 TAMPA, FL	5. Certifcate of Status Desired ☑ **$8.75** Additional Fee Required
Zip / Country 24 33617 25 US	Zip / Country 29 33617 30 US	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

ERICKSON, ARTHUR H
146 HORIZON COURT
LAKELAND FL 33813

10. Name and Address of New Registered Agent

81 Name WILLIAM C. SPIVEY
82 Street Address (P.O. Box Number is Not Acceptable) 7628 N. 56TH STREET
83 SUITE 8
84 City TAMPA FL 85 Zip Code 33617

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE WILLIAM C. SPIVEY 3/8/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☑ DELETE	1.1 TITLE	VD	☐ Change ☑ Addition
NAME	HAAS, FRANK H		1.2 NAME	WIENKE, DONALD	
STREET ADDRESS	146 HORIZON COURT		1.3 STREET ADDRESS	2244 SILVER LAKES DR, N	
CITY-ST-ZIP	LAKELAND FL		1.4 CITY-ST-ZIP	LAKELAND, FL 33810	
TITLE	TD	☐ DELETE	2.1 TITLE	D	☑ Change ☐ Addition
NAME	ERICKSON, ARTHUR H		2.2 NAME	ERICKSON, ARTHUR H.	
STREET ADDRESS	146 HORIZON COURT		2.3 STREET ADDRESS	146 HORIZON COURT	
CITY-ST-ZIP	LAKELAND FL 33813		2.4 CITY-ST-ZIP	LAKELAND, FL 33813	
TITLE	S	☑ DELETE	3.1 TITLE	TD	☐ Change ☑ Addition
NAME	LABOV, SARAH J		3.2 NAME	BURBRINK, GLEN	
STREET ADDRESS	146 HORIZON COURT		3.3 STREET ADDRESS	6132 SILVER LAKES DR, E.	
CITY-ST-ZIP	LAKELAND FL 33813		3.4 CITY-ST-ZIP		
TITLE	VD	☐ DELETE	4.1 TITLE	PD	☑ Change ☐ Addition
NAME	TILTON, EDWARD H		4.2 NAME	TILTON, EDWARD H	
STREET ADDRESS	211 SILVER RE DRIVE		4.3 STREET ADDRESS	2211 SILVER RE DRIVE	
CITY-ST-ZIP	LAKELAND FL 33810		4.4 CITY-ST-ZIP	LAKELAND, FL 33810	
TITLE		☐ DELETE	5.1 TITLE	SD	☐ Change ☑ Addition
NAME			5.2 NAME	TILTON, VIRGINIA	
STREET ADDRESS			5.3 STREET ADDRESS	2211 SILVER RE DRIVE	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	LAKELAND, FL 33810	
TITLE		☐ DELETE	6.1 TITLE	D	☐ Change ☑ Addition
NAME			6.2 NAME	JAMESON, JAMIE	
STREET ADDRESS			6.3 STREET ADDRESS	6228 SILVER LAKES DR, E.	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	LAKELAND, FL 33810	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE Edward H Tilton PRESIDENT (EDWARD) H. TILTON 3/8/99 813-988-3684
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (11/98)

247634-G00540-13
N41040

ADDITIONAL DIRECTORS

SILVER LAKES HOMEOWNERS' ASSN.

TITLE:	D
NAME:	MACKENZIE, WARREN
STREET ADDRESS:	6109 SILVER LAKES DR, W
CITY-ST-ZIP:	LAKELAND, FL 33810