2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 28, 2006 8:00 am Secretary of State

02-28-2006 90014 044 ****61.25

DOCUMENT # N41040 1. Entity Name SILVER LAKES OF LAKELAND HOMEOWNERS ASSOCIATION, INC.					02-28-2006 90014 044 ****61.23				
Principal Place of Business *5620 US HWY 98 N. PO BOX 921 SUITE B LAKELAND, FL 33809 Mailing Addres PO BOX 921 LAKELAND, FL			2108), FL 33804				-1517 61511 6151	00407	
5600 U.S.Hwy 98. N.		ailing Address							
Suite, Apt. # etc.		Suite, Apt. #, etc.			02012006 Chg-NP CR2E037 (11/05)				
City & State LAKEL AND, FL		City & State	ity & State		4. FEI Number Applied For 59-3082153 Not Applicable				
Zip 33.80	09 Country K	Zip	Country		5. Certificate of Si	tatus Desired		\$8.75 Addi ee Required	
	6. Name and Address of Current Register	tered Agent	Name		7. Name and Add	lress of New R	egistered A	gent	
HARKINS, WM. R 5620 U.S. HWY 98 N LAKELAND, FL 33809 LAKELAND, FL 33809 LAKELAND, FL 33809)		
			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, 2006	1	9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	Make check payable to Florida Department of State			
10.	OFFICERS AND DIRECTO	DRS	11.	1	ADDITIONS/CHANG	ES TO OFFICE	RS AND DIF	RECTORS IN	10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BURNS, TOM 2172 SILVER RD LAKELAND, FL 33810	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP FIFE, PHIL 2138 SILVER RE DR. LAKELAND, FL 33809	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	Addition
TITLE NAME STREET ADDRESS CITY+ST-ZIP	DT HERSHBERGER, LEROY 2146 SILVER RE DRIVE LAKELAND, FL 33810	S Detete	TITLE NAME STREET ADDRESS CITY-SI-ZIP					Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RICHARDSON, JAMES 2119 SILVER RE DRIVE LAKELAND, FL 33810	□ Delete	TITLE NAME STREET ADORESS CITY-ST-ZIP					Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP WIECZOREK, MARY 2166 SILVER LAKE DRIVE NORTH LAKELAND, FL 33310	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	Addition
TITLE NAME		☐ Delete	TITLE NAME	WA	40DELL	-, Bill	DIR	☐ Change	Addition

THEST

STREET ADDRESS
CITY-ST-ZIP

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 with an address, with all other like empowered.

SIGNATURE: