

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 SEP -2 PM 3:28

DOCUMENT # N98000005249

Corporation Name

SILVER CREEK RESIDENTS' ASSOCIATION, INC.

Principal Place of Business

C/O PULTE HOME CORPORATION
9220 BONITA BEACH ROAD #215
FORT MYERS FL 34145

Mailing Address

C/O PULTE HOME CORPORATION
9220 BONITA BEACH ROAD #215
FORT MYERS FL 34145



04-14-99 90211 021 \$61.25

Principal Place of Business	23. Mailing Address	3. Date Incorporated or Qualified
Suite, Apt. #, etc.	Suite, Apt. #, etc.	09/11/1998
City & State	City & State	4. FEI Number ☒ Applied For Not Applicable
Zip	Zip	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
Country	Country	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

WOLPERT, GREG G
C/O PULTE HOME CORPORATION
9220 BONITA BEACH ROAD #215
BONITA SPRINGS FL 34135

81. Name	10. Name and Address of New Registered Agent
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	85. Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

OFFICERS AND DIRECTORS	ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS
1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY-ST-ZIP	11. TITLE 12. NAME 13. STREET ADDRESS 14. CITY-ST-ZIP
5. TITLE 6. NAME 7. STREET ADDRESS 8. CITY-ST-ZIP	15. TITLE 16. NAME 17. STREET ADDRESS 18. CITY-ST-ZIP
9. TITLE 10. NAME 11. STREET ADDRESS 12. CITY-ST-ZIP	19. TITLE 20. NAME 21. STREET ADDRESS 22. CITY-ST-ZIP
13. TITLE 14. NAME 15. STREET ADDRESS 16. CITY-ST-ZIP	23. TITLE 24. NAME 25. STREET ADDRESS 26. CITY-ST-ZIP
17. TITLE 18. NAME 19. STREET ADDRESS 20. CITY-ST-ZIP	27. TITLE 28. NAME 29. STREET ADDRESS 30. CITY-ST-ZIP
21. TITLE 22. NAME 23. STREET ADDRESS 24. CITY-ST-ZIP	31. TITLE 32. NAME 33. STREET ADDRESS 34. CITY-ST-ZIP
25. TITLE 26. NAME 27. STREET ADDRESS 28. CITY-ST-ZIP	35. TITLE 36. NAME 37. STREET ADDRESS 38. CITY-ST-ZIP
29. TITLE 30. NAME 31. STREET ADDRESS 32. CITY-ST-ZIP	39. TITLE 40. NAME 41. STREET ADDRESS 42. CITY-ST-ZIP
33. TITLE 34. NAME 35. STREET ADDRESS 36. CITY-ST-ZIP	43. TITLE 44. NAME 45. STREET ADDRESS 46. CITY-ST-ZIP
37. TITLE 38. NAME 39. STREET ADDRESS 40. CITY-ST-ZIP	47. TITLE 48. NAME 49. STREET ADDRESS 50. CITY-ST-ZIP
41. TITLE 42. NAME 43. STREET ADDRESS 44. CITY-ST-ZIP	51. TITLE 52. NAME 53. STREET ADDRESS 54. CITY-ST-ZIP
45. TITLE 46. NAME 47. STREET ADDRESS 48. CITY-ST-ZIP	55. TITLE 56. NAME 57. STREET ADDRESS 58. CITY-ST-ZIP
49. TITLE 50. NAME 51. STREET ADDRESS 52. CITY-ST-ZIP	59. TITLE 60. NAME 61. STREET ADDRESS 62. CITY-ST-ZIP
53. TITLE 54. NAME 55. STREET ADDRESS 56. CITY-ST-ZIP	63. TITLE 64. NAME 65. STREET ADDRESS 66. CITY-ST-ZIP
57. TITLE 58. NAME 59. STREET ADDRESS 60. CITY-ST-ZIP	67. TITLE 68. NAME 69. STREET ADDRESS 70. CITY-ST-ZIP
61. TITLE 62. NAME 63. STREET ADDRESS 64. CITY-ST-ZIP	71. TITLE 72. NAME 73. STREET ADDRESS 74. CITY-ST-ZIP
65. TITLE 66. NAME 67. STREET ADDRESS 68. CITY-ST-ZIP	75. TITLE 76. NAME 77. STREET ADDRESS 78. CITY-ST-ZIP
69. TITLE 70. NAME 71. STREET ADDRESS 72. CITY-ST-ZIP	79. TITLE 80. NAME 81. STREET ADDRESS 82. CITY-ST-ZIP
73. TITLE 74. NAME 75. STREET ADDRESS 76. CITY-ST-ZIP	83. TITLE 84. NAME 85. STREET ADDRESS 86. CITY-ST-ZIP
77. TITLE 78. NAME 79. STREET ADDRESS 80. CITY-ST-ZIP	87. TITLE 88. NAME 89. STREET ADDRESS 90. CITY-ST-ZIP
81. TITLE 82. NAME 83. STREET ADDRESS 84. CITY-ST-ZIP	91. TITLE 92. NAME 93. STREET ADDRESS 94. CITY-ST-ZIP
85. TITLE 86. NAME 87. STREET ADDRESS 88. CITY-ST-ZIP	95. TITLE 96. NAME 97. STREET ADDRESS 98. CITY-ST-ZIP
89. TITLE 90. NAME 91. STREET ADDRESS 92. CITY-ST-ZIP	99. TITLE 100. NAME 101. STREET ADDRESS 102. CITY-ST-ZIP

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:

[Signature]

3/31/96

(441)498-7711

CR2E037 (11/98)