2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State
04-28-2003 90524 018 ****61.25

DOCUMENT # N98000005249

1. Entity Name
SILVER CREEK RESIDENTS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
C/O INTEGRATED PROPERTY MANAGEMENT 3435 10TH STREET N SUITE 201 NAPLES FL 34103	C/O INTEGRATED PROPERTY MANAGEMENT 3435 10TH STREET N SUITE 201 NAPLES FL 34103

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
%Gulf Breeze Management Services of SW FL LLC 27725 Old 41	%Gulf Breeze Management Services of SW FL LLC 27725 Old 41
Suite, Apt. #, etc. 104	Suite, Apt. #, etc. 104
City & State Bonita Springs, FL	City & State Bonita Springs, FL
Zip / Country 34135 / USA	Zip / Country 34135 / USA

4. FEI Number 59-3571353 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HENNELLS, SCOTT WEIBAL & HENNELLS 9240 BONITA BEACH ROAD #3305 BONITA SPRINGS FL 34135	Name Weidner, Ralph Gulf Breeze Management Services of SW FL, LLC Street Address (P.O. Box Number is Not Acceptable) 27725 Old 41 Suite 104 City: Bonita Springs **FL** Zip Code: 34135

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 Ralph Weidner — Ralph Weidner — 4/22/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

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 DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD REYNOLDS, JOHN 23745 STONEYRIVER PLACE BONITA SPRINGS FL 34135	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/D Butt, Charles H. 23656 Stony River Place Bonita Springs, FL 34135	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD FUCHS, JUDY 23267 STONYRIVER PLACE BONITA SPRINGS FL 34135	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V/D Safron, Richard P. 23733 Stoney River Place Bonita Springs, FL 34135	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD WHITE, EDWIN 23809 STONYRIVER PLACE BONITA SPRINGS FL 34135	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/T/D Risser, Caroline M. 23713 Stoney River Place Bonita Springs, FL 34135	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

12. 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 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: REQUIRED Charles H. Butt 4/22/03 (239) 949-1928