## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N98000006784

## **FILED** Apr 21, 2008 8:00 am Secretary of State 04-21-2008 90074 045 \*\*\*\*61.25

1. Entity Name SILVER OAK NEIGHBORHOOD ASSOCIATION, INC.									
Principal Place of Business C/O LIGHTHOUSE PROPERTY MGMT 16 CHURCH STREET OSPREY, FL 34229		Mailing Address C/O LIGHTHOUSE PROPERTY MGMT 16 CHURCH STREET OSPREY, FL 34229					<b>11</b>      <b>60</b>    0 <b>0</b>        1 <b>1</b>	19k 92lik 010i	11 <b>61 1</b> 8 1 <b>11</b> 1
2. Principal Place of Business - No P.O. Box #		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01182008 CI	ng-NP	CR2E037 (1	2/06)	
City & State		City & State			4. FEI Number 65-091973	2			plied For t Applicable
Zip	Country	Zip	Country		5. Certificate of St	atus Desired		75 Addi Required	
	6. Name and Address of Current	Registered Agent			7. Name and Add	ress of New Re	gistered Ager	it	
SCHUELE, WERNER 8975 BLOOMERELD BLVD SARASOFA, EL 34238				Name PHIL Lo MONACO Street Address (P.O. Box Number is Not Acceptable)					
					JUNT (	LUB W	Ay		
			City C.	IR KI	SOTA		FL	Zip Code	38
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 plinted rights of requisitered agent and bits if approaches (INOTE, Registered Agent signature required when reinstating)  DATE									
ogradice, typeo or printed righe of required agent and tipe if appricable (no.cc, negocieta Agent signature teduse) when reinstaling)									
Filling-Fee is \$61.25  Due by May 1, 2008  9. Election Campaigs Financing Trust Fund Contribution					\$5.00 May Be Added to Fees		ke check pa la Departme	-	i
10.	, OFFICERS AND DI	RECTORS	11.		ADDITIONS/CHANG	ES TO OFFICER	S AND DIREC	FORS IN	10
TITLE .	P WHARTON, GARRY	☐ Delete	TITLE NAME	7				Change	Addition
STREET ADDRESS CITY-ST-ZIP	9024 WILDLIFE LOOP SARASOTA, FL 34238		STREET ADDRESS CITY-ST-ZIP	90	BY MELANI 20 WILDLII RASOTA, F	ES LOOP	<b>1</b>		
				->A	RASOTA, F	L. 3403			
TATLE	SD	☐ Delete	TITLE				Ц	Change	Addition
NAME	ROTH, GILBERT		NAME	:					
STREET ADORESS : CITY-ST-ZIP	8890 BLOOMFIELD BLVD SARASOTA, FL 34238		STREET ADDRESS CITY-ST-ZIP			<u></u>			
HILF	D	Delete	TITLE					Change	Addition
NAME	NERI, RON		NAME						
STREET ADDRESS CITY-ST-ZIP	9016 ROCKY LAKE CT SARASOTA, FL 34238		STREET ADDRESS CITY-ST-ZIP					_	
TITLE	TD	Delete	TITLE	PH	1/L LOMON	ACO	I.	Change	Addition
NAME	SCHUELE, WERNER		NAME	62	25 1/11/17	CLUBWA	ly		
STREET ADORESS	8975 BLOOMFIELD BLVD.		STREET ADDRESS	22	ין אישרו בכב		/		
CITY-ST-ZIP	SARASOTA, FL 34238		CITY-ST-ZIP	SA	IIL LO MON 35 HUNT RASOTA, FI.	34238			
*IT; F	D	Deletu	963					Chande	☐ Adatio
NAME	CAROLAN, NANCY	•	NAME						
STREET ADDRESS CITY-ST-ZIP	8965 WILDLIFE LOOP SARASOTA, FL 34238		STREET ADDRESS CITY-ST-ZIP					J	
			<b></b>	-			1- 1	f trans	f71 Assume
DILE	VPAD	☐ Delete	MLÉ NAMÉ				لـا -	Change	Addition
NAMÉ	RUBEN, CLAUDIO		NAME STREET ADDRESS						
STREET AODRESS CITY-ST-ZIP	5319 HUNT CLUB WAY SARASOTA, FL 34238		City-ST-ZIP						
	l	n this filing door got smallh. In a		onteine	Lin Chanter 110 Fts	rida Statutos 14	irther codify the	nat the in	formation
12. Thereby 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 attachmyetit with an address, with all other like empowered.									