

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

37.

FILED
Apr 24, 2007 8:00 am
Secretary of State

03-22-2007 90011 011 ****61.25

DOCUMENT # N99000003890 1. Entity Name SILVERADO OWNERS ASSOCIATION, INC.			
Principal Place of Business J & L PROPERTY MANAGEMENT INC 10191 W SAMPLE ROAD #203 CORAL SPRINGS, FL 33065 US <i>Miami Management</i>		Mailing Address J & L PROPERTY MANAGEMENT INC 10191 W SAMPLE ROAD #203 CORAL SPRINGS, FL 33065 US <i>Miami Management</i>	
2. Principal Place of Business No P.O. Box # 1145 Sawgrass Corp Pkwy		3. Mailing Address 1145 Sawgrass Corp Pkwy	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State Sunrise		City & State Sunrise	
Zip 33323	Country 	Zip 33323	Country
4. FEI Number 65-0949108		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CALDERAZZO, JAMES C/O J & L PROPERTY MANAGEMENT INC 10191 W SAMPLE ROAD SUITE #203 CORAL SPRINGS, FL 33065		7. Name and Address of New Registered Agent Name DAVID M. BAUMAN Street Address (P.O. Box Number is Not Acceptable) 4050 W. BLANCK BLVD. City PLANTATION FL Zip Code 33317	
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 DATE 3.19.07 (Signature typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reissuing) (DATE)			
Filing Fee is \$61.25 Due by May 1, 2007		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 BAJNATH, PRAD 7872 NW SILVERADO CIRCLE DAVIE, FL	TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD NIGEL LOVELL-MARTIN 7873 S. SILVERADO CIRCLE, DAVIE, FL
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D CARUSO, TOM 7945 S SILVERADO CIRCLE DAVIE, FL 33024	TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	T SHARIF, GANNIM 7834 SILVERDAO CT DAVIE, FL 33024	TITLE NAME STREET ADDRESS CITY- ST- ZIP	T ROSA TORRES N. SILVERADO CIRCLE, DAVIE, FL
TITLE NAME STREET ADDRESS CITY- ST- ZIP	SD JENKINS-HARRIS, BRENDA 4101 W SILVERADO CIRCLE DAVIE, FL	TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D MONCHER, RICHARD 7891 S SILVERADO CIRCLE DAVIE, FL 33024	TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP		TITLE NAME STREET ADDRESS CITY- ST- ZIP	D LUIS ABREU W. SILVERADO CIRCLE, DAVIE, FL
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: NIGEL LOVELL-MARTIN DATE 4.19.07 (Signature typed or printed name of signing officer or director)			