


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 04, 2004 08:00 AM
Secretary of State

DOCUMENT # P93000016663	
1. Entity Name SILVER SENIOR SERVICES INCORPORATED	

Principal Place of Business 1134 - 38TH AVE NORTH ST. PETERSBURG, FL 33704-1155	Mailing Address 1134 - 38TH AVE NORTH ST. PETERSBURG, FL 33704-1155
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DO NOT WRITE IN THIS SPACE



01132004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3170263	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applied
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent PAGLEN, COLLEEN M 1134 - 38TH AVE NORTH ST. PETERSBURG, FL 33704-1155

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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE	PTD
NAME	MC NAUGHTON SR., JOHN A.
STREET ADDRESS	12301 SUNSHINE LN
CITY-ST-ZIP	TREASURE ISLAND, FL 337065033
TITLE	SVD
NAME	SHULMISTER, JANEEL C
STREET ADDRESS	17515 SHADYSIDE CIRCLE
CITY-ST-ZIP	LUTZ, FL 33549
TITLE	D
NAME	PAGLEN, JAMES P
STREET ADDRESS	42 GULF BLVD., APT. 10
CITY-ST-ZIP	INDIAN ROCKS BEACH, FL 34635
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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U00000076145
03/04/04-80016-014 150.00

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 607, Florida Statutes; and that my name appears in Block 10 or Block changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 	March 1, 2004	(727) 527-1700
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