

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # P95000041045

1. Corporation Name

SILVERTHORN ENTERPRISES, INC.

Principal Place of Business

6615 FORESTWOOD DR W
LAKELAND FL 33811
US

Mailing Address

6615 FORESTWOOD DR W
LAKELAND FL 33811
US

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip Country

Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

KEIDAISH, PHILIP F JR.
505 WEKIVA SPRINGS ROAD
SUITE 800
LONGWOOD FL 32779

3. Date Incorporated or Qualified

05/24/1995

4. FEI Number

59-3316620

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81

Name

RICHARD C. SILVERTHORN

82

Street Address (P.O. Box Number is Not Acceptable)

83

6615 FORESTWOOD DR. W.

84

City

LAKELAND

FL

85

Zip Code
33811

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Richard C. Silverthorn
Signature, typed or printed name of registered agent and title if applicable.

RICHARD C. SILVERTHORN, DIRECTOR

4-13-99

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME SILVERTHORN, RICHARD C
STREET ADDRESS 6615 FORESTWOOD DR W
CITY-ST-ZIP LAKELAND FL

TITLE D ☐ DELETE
NAME SILVERTHORN, PATRICIA A
STREET ADDRESS 6615 FORESTWOOD DR W
CITY-ST-ZIP LAKELAND FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

14. 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 607, 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:

Richard C. Silverthorn
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD C. SILVERTHORN 4-13-99

Date

Daytime Phone #

941-646-2211

FILED
Apr 19, 1999 8:00 am
Secretary of State

04-19-1999 90035 014 ***150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (11/98)