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

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

FILED

Mar 25 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000048575 (1)

PICERNE-SILVER RIDGE DEVELOPMENT, INC.

Principal Plac	ce of Business	Mailing Address			
4000 N. ORLANDO AVENUE		215 N. EOLA DRIVE			
-SUITE-A-		ORLANDO FL 32801			
WANTER-PARI	K-FL-02700-	US		DO NOT WRITE IN THIS	S SPACE
İ				3. Date Incorporated or Qualified	
2. Principal f	Place of Business	2a, Mailing Address		06/21/1995 4. FEI Number	Applied For
· ·	N. Westmonte Drive	26		59-3320960	Not Applicable
Suite, Apt		Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Sta		City & State		6. Election Campaign Financing	\$5.00 May Be
-01	onte Springs, FL	28	0	Trust Fund Contribution	Added to Fees
Zip 327	Country	Zip	Country	8. This corporation owes or has paid the c	urrent year Intangible
24 327	25 25 Name and Address of Curren		30]	Personal Property Tax due June 30. 10. Name and Address of New Registered	
FILDES, RICHARD J 81 Name					
215 NORTH EOLA DRIVE			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
ORLANDO FL 32801			5treet Addr	ress (P.O. Box Number is Not Acceptable)	
			83		
			84 City		85 Zip Code
			City	F	L S Zip Code
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	Signature, typed or printed name of registered age	it and title if applicable (NOTE	Registered Agent signature requir	red when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	D	☐ DELETE	1.1 TITLE D		Change Addition
NAME	PICERNE, ROBERT M			ICERNE, Robert M.	
STREET ADDRESS	1000 N. ORLANDO AVENUE, (SUITE-A-		47 N. Westmonte Drive	
CITY-ST-ZIP	-WINTER PARK FL-22789	Drutte	4	ltamonte Springs, FL 3271	
TITLE	S S	☐ DELETE	2.1 TITLE S	PTCU Inch U	Change
STREET ADDRESS	ERICH, JACK W	A _		RICH, Jack W. 47 N. Westmonte Drive	ĺ
CITY-ST-ZIP	WINTED DARK EL	~-			,
TITLE		DELETE	3.1 TITLE	<u>ltamonte Springs, FL 3271</u>	Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADORESS		
CITY-ST-ZIP	·		3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE	**************************************	☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4 4 CITY-ST-ZIP	·	
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		Loriere	5.4 City-St-ZiP		Change Laddites
TITLE	i	DELETE	6.1 TITLE		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 attackment with an address.

SIGNATURE:

SEC. 15-98 407/772-0200

6.2 NAME

6.3 STREET ADDRESS

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