SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # P9600001345 (3)

Corporation Name	•	U	-	_	•	_	•	•	•	

SILVER	& SILVER AUCTION CLU	B, INC.			
Principal Place	of Business	Mailing Address			
6311 RHODEN LANE 6311 RHODEN LANE FT. MYERS FL 33912 FT. MYERS FL 33912					
				3. Date Incorporated or Qualified 12/29/1995	3a. Date of Last Report
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		Suite Apt #, etc.		65-0640818	Not Applicable \$8.75 Additional
Suite, Apt #	r, etc	27 Saite Apr. F, etc.		5. Certificate of Status Desired	Fee Required
City & State	:	City & State		6. Election Campaign Financing	55.00 May Be
23		26		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	
24	25 9. Name and Address of Curr	29 ant Begistered Agent	30	Florida Statutes 10. Name and Address of New Reg	Yes No
	J. Maile and Address of Con	en registered Agent	81 Name	10. 110/10 0.10 7.00 0.110	
SILV	ver, stuart w				
	1 RHODEN LANE MYERS FL 33912		82 Street Add	ress (P.O. Box Number is Not Acceptabl	e)
			84 City		FL 85 Zip Code
office or re	o the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obl	te of Florida. Such change was as	uthorized by the corporati	oration submits this statement for the pu on's board of directors. Thereby accept	rpose of changing its registered the appointment as registered
SIGNATURE					
· · · · · · · · · · · · · · · · · · ·	Signature, type comprished name of registered		E Registered Agent signulate requi		DAGE
12.		AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFIC	Change Addition
THE	0		1 1 ToTLE		Change C Adultan
NAME CIRCL ADDOCCO	SILVER, STUART W		1.2 NAME 1.3 STREET ADDRESS		
STREET ADDRESS CHTY+S1+ZIP	6311 RHODEN LANE		14 CITY - ST-ZIP		
TITLE	FT. MYERS FL 33912	DELETE	2 1 TIFLE		Change Addition
NAME	SILVER, FRANCES T		2 2 NAME		
STREET ADDRESS	6311 RHODEN LANE		2.3 STHEE? ADDRESS		
CITY - ST - ZIP	FT. MYERS FL 33912		2 4 CHTY - ST - ZIP		
TITLE		DELETE	3 1 TITLE		Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY - ST - ZIP		0
TITLE		DELETE	4 1 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS .		
CITY - ST - ZIP		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
TITLE		been	5 2 NAME		
NAME expert about ce			5.3 STREET ADDRESS		
STREET ADDRESS			5.4 CITY - ST - ZIP		
CITY-ST-ZIP TITLE		DELETE	617118		Change Addition
NAME			6 2 NAME		* L
STREET ADDRESS			6 3 STREET ADDRESS		
CITY - ST - ZIP			6 4 City - St - 7iP		
14. Ldo beret	by certify that the information supp	fied with this filing is voluntarily fu	rn shed and does not qua	lify for the exemption stated in Section 1 and accurate and that my signature sha	19 07(3)(k), Florida Statutes I

neaded on this animon report of suppremental animon report is true and accurate and that my signature shall have the same legal chect as it for director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and the k13 if changed, or on an attachment with an address. made under oath, that I am an officer that my name appears in Block 2 of

SIGNATURE:

8-2-96 (941) 768-1234