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 # **P97000043183**1. Corporation Name

SILVER LAKE COMMUNICATIONS, INC.

					-			
Principal Place	e of Business	Mailing Address						
1610 E. JEFFERSON STREET 1610 E. JEFFERSON STRE			T					
ORLANDO FL 32803 ORLANDO FL 32803						DO NOT WRITE IN THIS SE	PACE	
						3. Date Incorporated or Qualifed		
						05/12/1997		j
2 Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number	☐ Ap	plied For
21		26				59-3447509	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5 Certificate of Status Desired	\$8.75	Additional
22		27				5. Certifcate of Status Desired	Fee Re	equired
City & State	e	City & State				6. Election Campaign Financing	\$5.00	
23		28				Trust Fund Contribution	Added t	to Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year Intan	gible	
24	25		30			Tersonal Topolity Tux:	Yes	□No
9. Name and Address of Current Registered Agent 81					Name	10. Name and Address of New Registered Ag	ent	
CBU	MLEY, RUSS			°'	Name			
	E. JEFFERSON STREET			82 Street Add		ess (P.O. Box Number is Not Acceptable)		ĺ
			83				i	
ORLANDO FL 32803			03					
				84	City	FL	85 Zip (Code
11. Pursuant to the provisions of Sections 607,0582 and 607,1508, Florida Statutes, the above-named corp							anging its	registered
office or re agent. I a	egistered agent or both, in the State of familiar with and accept ve obligation	of Florida, Such change was au trans of, Section 607.0505, Flori	itnorizeo ida Stati	utes.	tne corporatio	on's board of directors. I hereby accept the appointr	78	edisteled
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	ORS IN 12
TITLE	P			1.1 TITLE			Change	Addition
NAME	CRUMLEY, RUSS	RUMLEY, RUSS 12N		AME				1
STREET ADDRESS			1.3 \$	REET	ADDRESS	• 5 · · · · · · · · · · · · · · · · · ·		Ì
CITY-ST-ZIP			1.4 CI	TY-S1	T-ZIP	**** *********************************	· 7	
TITLE		☐ DELETE	2.1 Ti	TLE			Change	Addition
NAME			2.2 N	WE				1
STREET ADDRESS			2.3 S	REET	ADDRESS			1
CITY-ST-ZIP			2.40	ΠY-S	T-ZIP			
TITLE		☐ DELETE	3.1 TI	πE			Change	☐ Addition
NAME			3.2 N	AME				
STREET ADDRESS			3.3 S	TREET	T ADDRESS			
CITY-ST-ZIP			3.4. CITY		T-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Į	Change	☐ Addition
NAME			4. 2 N	AME				
STREET ADDRESS			4.3 S	REET	TADDRESS			
CITY-ST-ZIP				TY-S1	T-ZIP			
TITLE		☐ DELETÉ	5.1 TI			ł	Change	Addition
NAME			5.2 N					
STREET ADDRESS			5.3 S	REET	TADDRESS			

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling 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 suppliemental 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 optrustee 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 man appears with an address, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

☐ DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

Change

☐ Addition

Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90105 007 ***150.00