# 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N2200008990

## Entity Name: SILVER OAK ESTATES HOMEOWNERS ASSOCIATION, INC.

#### **Current Principal Place of Business:**

280 E. PILOT ROAD LAS VEGAS, NV 89119

## **Current Mailing Address:**

280 E. PILOT ROAD LAS VEGAS, NV 89119 US

# FEI Number: NOT APPLICABLE

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 S PINE ISLAND RD PLANTATION, FL 33324 US

FATION, FL 33324 US

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.

#### SIGNATURE:

Electronic Signature of Registered Agent

# **Officer/Director Detail :**

Title	DIRECTOR	Title	PRESIDENT
Name	KUSHNER, JORDAN	Name	JONES, TODD
Address	280 E. PILOT ROAD	Address	280 E. PILOT ROAD
City-State-Zip:	LAS VEGAS NV 89119	City-State-Zip:	LAS VEGAS NV 89119
Title	DIRECTOR	Title	PRESIDENT/CEO
Name	JONES, TODD	Name	HALLIDAY, MATTHEW
Address	280 E. PILOT ROAD	Address	280 E. PILOT ROAD
City-State-Zip:	LAS VEGAS NV 89119	City-State-Zip:	LAS VEGAS NV 89119
Title	VP	Title	TREASURER/CFO
Title Name	VP PALMER, LINCOLN	Title Name	TREASURER/CFO PALMER, LINCOLN
Name	PALMER, LINCOLN 280 E. PILOT ROAD	Name	PALMER, LINCOLN
Name Address	PALMER, LINCOLN 280 E. PILOT ROAD	Name Address	PALMER, LINCOLN 280 E. PILOT ROAD
Name Address City-State-Zip:	PALMER, LINCOLN 280 E. PILOT ROAD LAS VEGAS NV 89119	Name Address City-State-Zip:	PALMER, LINCOLN 280 E. PILOT ROAD LAS VEGAS NV 89119
Name Address City-State-Zip: Title	PALMER, LINCOLN 280 E. PILOT ROAD LAS VEGAS NV 89119 SECRETARY	Name Address City-State-Zip: Title	PALMER, LINCOLN 280 E. PILOT ROAD LAS VEGAS NV 89119 SECRETARY
Name Address City-State-Zip: Title Name Address	PALMER, LINCOLN 280 E. PILOT ROAD LAS VEGAS NV 89119 SECRETARY REITER, JOSHUA	Name Address City-State-Zip: Title Name	PALMER, LINCOLN 280 E. PILOT ROAD LAS VEGAS NV 89119 SECRETARY KUSHNER, JORDAN

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

#### SIGNATURE: JORDAN KUSHNER

SECRETARY

04/04/2024

Electronic Signature of Signing Officer/Director Detail

Date

# FILED Apr 04, 2024 Secretary of State 5074992744CC

Certificate of Status Desired: No

Date