#### 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25434

Entity Name: SILVER OAKS COMMUNITY ASSOCIATION, INC.

FILED Mar 27, 2017 Secretary of State CC9300145876

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

FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR N STE 100 ST PETERSBURG, FL 33716

## **Current Mailing Address:**

FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR N STE 100 SAINT PETERSBURG, FL 33716 US

FEI Number: 59-2922581 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

HIRSH, ELLEN WETHERINGTON, HAMILTON 1010 N FL. AVE TAMPA, FL 33672-0727 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: ELLEN HIRSH 03/27/2017

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title S

Name BRAVINDER, JON Name HAMEL, MARY

Address FIRSTSERVICE RESIDENTIAL Address FIRSTSERVICE RESIDENTIAL

2870 SCHERER DR N STE 100 2870 SCHERER DR N STE 100

City-State-Zip: ST PETERSBURG FL 33716 City-State-Zip: ST PETERSBURG FL 33716

Title TREASURER Title VP

Name GEIGER, ELIZABETH Name SHELDON, JOHN

Address FIRSTSERVICE RESIDENTIAL Address FIRSTSERVICE RESIDENTIAL

2870 SCHERER DR N STE 100 2870 SCHERER DR N STE 100

City-State-Zip: ST PETERSBURG FL 33716 City-State-Zip: ST PETERSBURG FL 33716

Title DIRECTOR Title DIRECTOR

Name COLLINS, JEFFREY Name ROEHRIG, MONICA

Address FIRSTSERVICE RESIDENTIAL Address FIRSTSERVICE RESIDENTIAL

2870 SCHERER DR N STE 100 2870 SCHERER DR N STE 100

City-State-Zip: ST PETERSBURG FL 33716 City-State-Zip: ST PETERSBURG FL 33716

Title DIRECTOR Title DIRECTOR

Name FAILLA, RICHARD Name MCCLOSKEY, LINDA

Address FIRSTSERVICE RESIDENTIAL Address FIRSTSERVICE RESIDENTIAL

2870 SCHERER DR N STE 100

City-State-Zip: ST PETERSBURG FL 33716 City-State-Zip: ST PETERSBURG FL 33716

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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: JON BRAVINDER PRESIDENT 03/27/2017

2870 SCHERER DR N STE 100

# Officer/Director Detail Continued:

Title DIRECTOR

Name VAN ALLEN, JACK JR.

Address FIRSTSERVICE RESIDENTIAL

2870 SCHERER DR N STE 100

City-State-Zip: ST PETERSBURG FL 33716