

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002342

FILED
Apr 27, 2016
Secretary of State
CC0452975007

Entity Name: SILVERISLES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O AMERICAN MANAGEMENT GROUP, LLC
9050 PINES BOULEVARD SUITE 480
PEMBROKE PINES, FL 33024

Current Mailing Address:

C/O AMERICAN MANAGEMENT GROUP, LLC
9050 PINES BOULEVARD SUITE 480
PEMBROKE PINES, FL 33024 US

FEI Number: 65-0830862

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EISINGER, BROWN, LEWIS & FRANKEL, PA
4000 HOLLYWOOD BOULEVARD
SUITE 265-SOUTH
HOLLYWOOD, FL 33021 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: DENNIS EISINGER

04/27/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DVP
Name BOGA, BILL
Address C/O AMERICAN MANAGEMENT GROUP, LLC
9050 PINES BOULEVARD SUITE 480
City-State-Zip: PEMBROKE PINES FL 33024

Title DP
Name WASHINGTON, EMANUEL
Address C/O AMERICAN MANAGEMENT GROUP, LLC
9050 PINES BOULEVARD SUITE 480
City-State-Zip: PEMBROKE PINES FL 33024

Title DT
Name LE ROSE, TONY
Address C/O AMERICAN MANAGEMENT GROUP, LLC
9050 PINES BOULEVARD SUITE 480
City-State-Zip: PEMBROKE PINES FL 33024

Title SD
Name GORFINKEL, EDWARD
Address C/O AMERICAN MANAGEMENT GROUP, LLC
9050 PINES BOULEVARD SUITE 480
City-State-Zip: PEMBROKE PINES FL 33024

Title D
Name CARBALLO, JORGE
Address C/O AMERICAN MANAGEMENT GROUP, LLC
9050 PINES BOULEVARD SUITE 480
City-State-Zip: PEMBROKE PINES FL 33024

Title DIRECTOR
Name JAMES, MARCUS
Address C/O AMERICAN MANAGEMENT GROUP, LLC
9050 PINES BOULEVARD SUITE 480
City-State-Zip: PEMBROKE PINES FL 33024

Title DIRECTOR
Name GIRALDO, NELSON
Address C/O AMERICAN MANAGEMENT GROUP, LLC
9050 PINES BOULEVARD SUITE 480
City-State-Zip: PEMBROKE PINES FL 33024

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: WASHINGTON , EMANUEL

PRESIDENT

04/27/2016

