

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91519 025 ****61.25

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N01000007484

1. Entity Name
**OAKMONT AT SILVER LAKE RESIDENTS
ASSOCIATION, INC.**



Principal Place of Business
8529 US HIGHWAY 441
LEESBURG, FL 34788

Mailing Address
8529 US HIGHWAY 441
LEESBURG, FL 34788

2. Principal Place of Business
10331 PLEASANT WILLOW DR
Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 895460
Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State
LEESBURG, FL
Zip
34788 Country
USA

City & State
LEESBURG, FL
Zip
34789 Country
USA

4. FEI Number
01-0599048 Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**PULLUM, J. STEPHEN
1330 W. CITIZENS BLVD.
SUITE 701
LEESBURG, FL 34748**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when registering)

DATE

FILE NOW! FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP GODFREY, JOSEPH P JR. 8529 US HIGHWAY 441 LEESBURG, FL 34788 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVST GODFREY, JOSEPH P III 8529 US HIGHWAY 441 LEESBURG, FL 34788 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GODFREY, DORIS 8529 US HIGHWAY 441 LEESBURG, FL 34788 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition P.O. Box 895282 LEESBURG, FL 34789
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 10041 JACARANDA AVENUE CLEARWATER, FL 34711
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JOSEPH P. GODFREY, JR.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/03
Date

352-283-6988
Daytime Phone #

CP2EC037 (10/02)