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May 19 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N37248 (4)
1. Corporation Name
SERENITY PLACE II CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business Mailing Address
C/O JOAN BADR 1440 N.W. 45TH STREET, #A-1 POMPANO BCH FL 33064
C/O JOAN BADR 1440 N.W. 45TH STREET, #A-1 POMPANO BCH FL 33064

3. Date Incorporated or Qualified
03/23/1990

4. FEI Number 65-0180802 Applied For Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business 2a. Mailing Address

21 C/o JEANETTE MATHEWS 26 C/o JEANETTE MATHEWS
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 1440 NW 45th STREET #A-1 1440 NW 45 ST. #A3
City & State City & State
23 POMPANO BCH, FL 28 POMPANO BCH, FL
Zip Country Zip Country
24 33064 25 BRWD 29 33064 30 BRWD

9. Name and Address of Current Registered Agent
HIRSCH, ELLEN G. ESQ
3111 STIRLING RD
FT LAUDERDALE FL 33312

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD GARDNER, BARBARA 1440 N.W. 45TH STREET, A4 POMPANO BEACH FL	<input checked="" type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP
TITLE	VTD BADR, JOAN 1440 N.W. 45TH STREET, A-1 POMPANO BEACH FL	<input checked="" type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
TITLE	PD STRAND, JUDY 2325 N.E. 30TH COURT LIGHTHOUSE POINT FL	<input checked="" type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
TITLE		<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	SD STRAND, JUDY 2325 NE 30 th CT. LIGHTHOUSE POINT, FL.
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	VTD JEANETTE MATHEWS 1440 NW 45 ST., A-3 POMPANO BCH, FL. 33064
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	PD Diana Cuprys 1440 NW 45 th ST, B-5 POMPANO BCH, FL 33064
<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Change <input type="checkbox"/> Addition	

14. I hereby certify that the information supplied with this filing 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 supplemental 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 or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 changed, or on an attachment with an address.

SIGNATURE: *Jeanette Mathews* 5-1-98 (05) 077-7737

C29E037 (10/97)