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: LISA A RULE

Electronic Signature of Signing Officer/Director Detail

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010956

Entity Name: SERENOA HOME OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2555 27TH AVE SUITE G-4 VERO BEACH, FL 32960

Current Mailing Address:

PO BOX 650429 VERO BEACH, FL 32965 US

FEI Number: 20-4666943

Name and Address of Current Registered Agent:

RULE, LISA A 2555 27TH AVE SUITE G-4 VERO BEACH, FL 32960 US Certificate of Status Desired: No

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: LISA A RULE				04/30/2014
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	DP	Title	DVPS	
Name	HANDLER, WILLIAM	Name	RECIO, JULIO	
Address	1775 SW GATLIN BLVD SUITE 206	Address	1775 SW GATLIN BLVD SUITE 206	
City-State-Zip:	PORT ST LUCIE FL 34953	City-State-Zip:	PORT ST LUCIE FL 34953	
Title	DT	Title	Μ	
Name	FLOWERS, RENE	Name	RULE, LISA A	
Address	1775 SW GATLIN BLVD	Address	2555 27TH AVE	
City-State-Zip:	PORT ST LUCIE FL 34953	City-State-Zip:	SUITE G-4 VERO BEACH FL 32960	

04/30/2014 Date

FILED Apr 30, 2014 Secretary of State CC4991034208