## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.

AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) PROFIT FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 DOCUMENT # (5)542383 SERENA BUILDING CORPORATION Principal Place of Business Mailing Address 13781 FERN TRAIL DRIVE 13781 FERN TRAIL DRIVE N. FORT MYERS FL 33903 N. FORT MYERS FL 33903 3. Date Incorporated or Qualified 3a. Date of Last Report 08/05/1977 06/14/1995 2a. Mailing Address Applied For 2. Principal Place of Business Not Applicable 21 26 59-1761965 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 23 Country This corporation has liability for intangible tax under s 199 032 Florida Statutes Yes No 29 30 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent RI Name SERENA, GREGORY SCOTT Street Address (P.O. Box Number is Not Acceptable) 82 13781 FERN TRAIL DRIVE N. FORT MYERS FL 33903 83 84 City 85 Zip Code Pursuant to the provisions of Sections 607.0502 and 607.1508, 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE DATE (NOTE: Registered Agent signature required when retichal rig) Signature, typed or printed name of registered agent and their applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change Addition DELETE 1.1 TOTLE TITLE **PSD** 1.2 NAME NAME SERENA, GREGORY SCOTT 13 STREET ADDRESS 13781 FERN TRAIL DRIVE STREET ADDRESS 14 CITY - ST - ZIP CITY-ST-ZIP N. FORT MYERS FL 33903 Change Addition DELETE 2 1 1 ftf THE 2.2 NAME NAME 2 3 STHEET ADDRESS STREET ADDRESS 2.4 CiTY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAMÉ NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-\$1-ZIP CITY - ST - ZIP DELETE Change Addition 4.1 TiTLE TITLE 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS

CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Fiorida Statutes if 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 if changed, or on an attachment with an address

4 4 CIRY - ST - ZIP

54 CHY-ST-ZIP

6 3 STREET ADDRESS

5.1 TITLE

5.2 NAME 5 3 STREET ADDRESS

6.17(1)

6.2 NAME

G. SCOTT SERT G. SCOTT SERONA

DELETE

DELETE

CITY - ST - ZIP

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TITLE

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(36/8)CR2E034

Change Addition

Change Addition

941-656-0177