2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2009
Secretary of State

DOCUMENT# 724388

Entity Name: SERENO DEL SOL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2900 NORTH GULF BOULEVARD
BELLEAIR BEACH, FL 337863521 US

New Principal Place of Business:

Current Mailing Address:

8141 54TH AVE N
SAINT PETERSBURG, FL 33709 US

New Mailing Address:

FEI Number: 59-1560105 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FLORIDA COMMUNITY PROPERTY MANAGEMENT
8141 54TH AVENUE N
SAINT PETERSBURG, FL 33709 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: HAYNES, CHARLENE
Address: 2900 GULF BLVD, UNIT 306
City-St-Zip: BELLEAIR BEACH, FL 33786

Title: VP ( ) Delete
Name: SURETTE, ROBERT J
Address: 2900 GULF BVD 308
City-St-Zip: BELLEAIR BCH, FL 33786

Title: TS ( ) Delete
Name: AYO, JOSEPH
Address: 2900 GULF BLVD, UNIT 213
City-St-Zip: BELLEAIR BEACH, FL 33786

Title: S ( ) Delete
Name: LISWITH, CARL
Address: 2900 GULF BLVD, UNIT 311
City-St-Zip: BELLEAIR BEACH, FL 33786

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BOB KRESNIK MAN 01/07/2009

Electronic Signature of Signing Officer or Director — Date