## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#767017** 

FILED Apr 05, 2009 Secretary of State

Entity Name: SERENITY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O THEODORE JANOWITZ 4826 S.W. 29TH AVENUE

CAPE CORAL, FL 33914

Current Mailing Address:

C/O THEODORE JANOWITZ 4826 S.W. 29TH AVENUE CAPE CORAL, FL 33914

FEI Number: 59-2294532

FEI Number Applied For ( )

FEI Number Not Applicable ( )

t Applicable ( ) Certificate of Status Desired ( )

US

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

New Principal Place of Business:

C/O THEODORE JANOWITZ

4826-1 S.W. 29TH AVENUE

C/O THEODORE JANOWITZ

4826-1 S.W. 29TH AVENUE

CAPE CORAL, FL 33914

CAPE CORAL, FL 33914

New Mailing Address:

JANOWITZ, THEODORE
4826 SW 29TH AVENUE
CAPE CORAL, FL 33914 US

JANOWITZ, THEODORE
4826-1 SW 29TH AVENUE
CAPE CORAL, FL 33914

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:

04/05/2009

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

 Title:
 TSD
 ( ) Delete

 Name:
 JANOWITZ, THEODORE

 Address:
 4826 SW 29TH AVE

 City-St-Zip:
 CAPE CORAL, FL
 00000,

Title: PD () Delete
Name: MCTIGHE, DAVID
Address: 4826 SW 29TH AVE.
City-St-Zip: CAPE CORAL, FL 33914

 Title:
 VD
 ( ) Delete

 Name:
 AMES, GENE

 Address:
 4826 SW 29TH AVE.

 City-St-Zip:
 CAPE CORAL, FL 33914

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TSD (X) Change ( ) Addition Name: JANOWITZ, THEODORE

Address: 4826-1 SW 29TH AVE
City-St-Zip: CAPE CORAL, FL 33914

Title: PD (X) Change ( ) Addition

Name: MCTIGHE, DAVID
Address: 4826-4 SW 29TH AVE.
City-St-Zip: CAPE CORAL, FL 33914

Title: VD (X) Change ( ) Addition

 Name:
 AMES, GENE

 Address:
 4826-3 SW 29TH AVE.

 City-St-Zip:
 CAPE CORAL, FL 33914

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: THEODORE JANOWITZ TSD 04/05/2009