## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000001694

FILED Apr 17, 2007 Secretary of State

Entity Name: SERENITY HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
	CALLAS NITY LANE BOR, FL 346	83			
Current Mailing Address:			New Maili	New Mailing Address:	
	CALLAS NITY LANE BOR, FL 346	83			
FEI Number:	59-3729568	FEI Number Applied For ( )	El Number Not Appl	icable ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:	
	RAL AVE. SBURG, FL :				
The above in the State		submits this statement for the purp	ose of changing if	ts registered office or registered agent, or both,	
SIGNATURE:					
Electronic Signature of Registered Agent				Date	
OFFICERS AND DIRECTORS:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P/D () CALLAS, LAUR 2245 SERENIT PALM HARBOR	Y LANE	Title: Name: Address: City-St-Zip:	()Change()Addition	
Title: Name: Address: City-St-Zip:	T/D ( ) SANCHEZ, LUIS 2222 SERENIT PALM HARBOR	Y LN	Title: Name: Address: City-St-Zip:	T/D (X) Change ( ) Addition BUTRICO, CARMEN T/D 1561 SUNRAY DRIVE PALM HARBOR, FL 34683	
Title: Name: Address: City-St-Zip:	S/C () FEIJOO, ROLA 2252 SERENIT PALM HARBOR	Y LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	VP () Change (X) Addition KOSSIVAS, TASIS 2268 SERENITY LANE PALM HARBOR, FL 34683	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	BD/M () Change (X) Addition LEWIS, DRIC 2223 SERENITY LANE PALM HARBOR, FL	

I hereby certify that the information supplied with this filing does not qualify for the 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: LAURA CALLAS P/D 04/17/2007