# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 25, 2007**
**Secretary of State**

DOCUMENT# N04000001636

**Entity Name:** SERENO CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

877 EXECUTIVE CENTER DR W, STE 205
ST PETERSBURG, FL 337022472

**New Principal Place of Business:**

15208 GULF BOULEVARD
MADEIRA BEACH, FL 33708

**Current Mailing Address:**

877 EXECUTIVE CENTER DR W, STE 205
ST PETERSBURG, FL 337022472

**New Mailing Address:**

9887 FOURTH STREET NORTH
SUITE #301
ST PETERSBURG, FL 33702

**FEI Number: 20-3695245** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SMITH, BRIAN K
9887 4TH ST NORTH
SAINT PETERSBURG, FL 33702 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: KING, RICHARD
Address: 9887 4TH ST NORTH
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: VPT ( ) Delete
Name: LYONS, DAVID
Address: 9887 4TH ST NORTH
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: S ( ) Delete
Name: BUALEY, MITCH
Address: 9887 4TH ST NORTH
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: ( ) Delete
Name:
Address:
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VPD (X) Change ( ) Addition
Name: KING, RICHARD
Address: 9887 4TH ST NORTH
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: PD (X) Change ( ) Addition
Name: LYONS, DAVID
Address: 9887 4TH ST NORTH
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: SD (X) Change ( ) Addition
Name: WAGMAN, SCOTT
Address: 9887 4TH ST NORTH
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: TD ( ) Change (X) Addition
Name: TIRMENSTEIN, DAVID
Address: 9887 FOURTH STREET NORTH #301
City-St-Zip: ST. PETERSBURG, FL 33702

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: DAVID LYONS P 04/25/2007

Electronic Signature of Signing Officer or Director — Date