


**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 11, 2007 8:00 am**  
**Secretary of State**

04-11-2007 90023 048 \*\*\*\*61.25

**DOCUMENT # N05000003235**

1. Entity Name  
**SERENGETI COMMUNITY ASSOCIATION, INC.**



Principal Place of Business  
~~17310 N. RIVER RD.~~  
 ALVA, FL 33920

Mailing Address  
 C/O ROBERT D. ROYSTON, JR.  
 P.O. DRAWER 60205  
 FORT MYERS, FL 33906

**40056353**



2. Principal Place of Business - No P.O. Box #  
**17050 Serengeti Circle**

3. Mailing Address  
 Suite, Apt. #, etc.

03152007 Chg-NP CR2E037 (12/06)

City & State  
**Alva, FL**

City & State

Zip  
**33920** Country  
**USA**

4. FEI Number  
**16-1721325**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
 ROYSTON, ROBERT D JR.  
 12670 NEW BRITTANY BLVD.  
 SUITE 101  
 FORT MYERS, FL 33907

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25 Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

**Make check payable to Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD <input type="checkbox"/> Delete
NAME	THIVIERGE, VALERIE
STREET ADDRESS	<del>17310 N. RIVER ROAD</del> <b>17050 Serengeti Circle</b>
CITY-ST-ZIP	ALVA, FL 33920
TITLE	VD <input type="checkbox"/> Delete
NAME	THIVIERGE, ALBERT
STREET ADDRESS	<del>17310 N. RIVER ROAD</del> <b>17050 Serengeti Circle</b>
CITY-ST-ZIP	ALVA, FL 33920
TITLE	STD <input type="checkbox"/> Delete
NAME	THIVIERGE, MATTHEW
STREET ADDRESS	<del>17310 N. RIVER ROAD</del> <b>17050 Serengeti Circle</b>
CITY-ST-ZIP	ALVA, FL 33920
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	<b>17050 Serengeti Circle</b>
CITY-ST-ZIP	<b>Alva, FL 33920</b>
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	<b>17050 Serengeti Circle</b>
CITY-ST-ZIP	<b>Alva, FL 33920</b>
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	<b>17050 Serengeti Circle</b>
CITY-ST-ZIP	<b>Alva, FL 33920</b>
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Valerie Thivierge* **Valerie Thivierge** **3/30/07** **239872-3037**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #