2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N07000003594

TI FILED
Dec 01, 2008
Secretary of State

Entity Name: TOWN HOMES AT SERENOLA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 3651 PINE TIP ROAD TALLAHASSEE, FL 32312 **Current Mailing Address: New Mailing Address:** 3651 PINE TIP ROAD TALLAHASSEE, FL 32312 FEI Number: 20-8834427 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BRADY, BRITTNEY 3727 SW 28TH TERRACE GAINESVILLE, FL 32608 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Delete () Change () Addition QUAKENBUSH, RICHARD Name: Name: 3651 PINE TIP ROAD Address: Address: City-St-Zip: TALLAHASSEE, FL 32312 City-St-Zip: Title: () Delete Title: () Change () Addition ALBER, MICHAEL Name: Name: Address: 3727 SW 28TH TERRACE #1 Address: City-St-Zip: GAINESVILLE, FL 32608 City-St-Zip: Title: STD (X) Delete Title: () Change () Addition QUAKENBUSH, KIMBERLY Name: Name: Address: 3727 SW 28TH TERRACE #2 Address: City-St-Zip: GAINESVILLE, FL 32608 City-St-Zip: Title: () Delete Title: () Change () Addition Name: ALBER, MICHAEL T Name: 3727 SW 28TH TERRACE #1 Address: Address: City-St-Zip: GAINESVILLE, FL 32608 City-St-Zip: Title: (X) Delete Title: () Change () Addition QUACKENBUSH, RICHARD Name: Name: 3651 PINE TIP ROAD Address: Address: City-St-Zip: TALLAHASSEE, FL 32312 City-St-Zip: Title: () Delete Title: () Change () Addition HOUGH, LISA F Name: Name: Address: 3727 SW 28TH TERRACE UNIT 3 Address: GAINESVILLE, FL 32608 City-St-Zip: 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: BRITTNEY BRADY REG 12/01/2008