

FILE NOW: FILING FEE IS \$61.25

FILED

May 09 1997 8:00am  
Secretary of State

|                                                          |                                                                                   |                                                                                                           |
|----------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| NONPROFIT<br>CORPORATION<br>ANNUAL REPORT<br><b>1997</b> |  | FLORIDA DEPARTMENT OF STATE<br><b>Sandra B. Mortham</b><br>Secretary of State<br>DIVISION OF CORPORATIONS |
|----------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|

|                                         |        |     |
|-----------------------------------------|--------|-----|
| DOCUMENT #                              | N29102 | (3) |
| 1. Corporation Name                     |        |     |
| THE SERENOA COMMUNITY ASSOCIATION, INC. |        |     |

|                                      |                                           |
|--------------------------------------|-------------------------------------------|
| Principal Place of Business          | Mailing Address                           |
| 7359 STACY LANE<br>SARASOTA FL 34241 | 7359 STACY LANE<br>SARASOTA FL 34241-9141 |



|                                                 |  |                     |  |                                              |  |                                                            |  |
|-------------------------------------------------|--|---------------------|--|----------------------------------------------|--|------------------------------------------------------------|--|
| 2. Principal Place of Business                  |  | 2a. Mailing Address |  | 3. Date Incorporated or Qualified            |  | 3a. Date of Last Report                                    |  |
| 21 7375 Stacy Lane                              |  | 26 7375 Stacy Lane  |  | 11/03/1988                                   |  | 04/15/1996                                                 |  |
| Suite, Apt. #, etc.                             |  | Suite, Apt. #, etc. |  | 4. FEI Number                                |  | Applied For                                                |  |
| 22                                              |  | 27                  |  | NOT APPLICABLE                               |  | Not Applicable                                             |  |
| City & State                                    |  | City & State        |  | 5. Certificate of Status Desired             |  | <input type="checkbox"/> \$8.75 Additional<br>Fee Required |  |
| 23 Sarasota, FL                                 |  | 28 Sarasota, FL     |  | 6. Election Campaign Financing               |  | <input type="checkbox"/> \$5.00 May Be<br>Added to Fees    |  |
| Zip                                             |  | Zip                 |  | Country                                      |  | Country                                                    |  |
| 24 34241                                        |  | 25 Sarasota         |  | 29 34241                                     |  | 30 Sarasota                                                |  |
| 9. Name and Address of Current Registered Agent |  |                     |  | 10. Name and Address of New Registered Agent |  |                                                            |  |

|                                                        |  |  |  |                                                                               |  |  |  |
|--------------------------------------------------------|--|--|--|-------------------------------------------------------------------------------|--|--|--|
| BISPHAM, CYRUS<br>7359 STACY LANE<br>SARASOTA FL 34241 |  |  |  | 81 Name<br>Levin and Tannenbaum, P.A.                                         |  |  |  |
|                                                        |  |  |  | 82 Street Address (P.O. Box Number is Not Acceptable)<br>1680 Fruitville Road |  |  |  |
|                                                        |  |  |  | 83 Suite 102                                                                  |  |  |  |
|                                                        |  |  |  | 84 City<br>Sarasota                                                           |  |  |  |
|                                                        |  |  |  | 85 Zip Code<br>FL 34236                                                       |  |  |  |

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE **Alan E. Tannenbaum, Esq. (Partner)** *[Signature]* DATE

|                            |                     |                                 |                    |                                                       |                                 |                                   |  |
|----------------------------|---------------------|---------------------------------|--------------------|-------------------------------------------------------|---------------------------------|-----------------------------------|--|
| 12. OFFICERS AND DIRECTORS |                     |                                 |                    | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                                 |                                   |  |
| TITLE                      | PTD                 | xx DELETE                       | 1.1 TITLE          | Director                                              | <input type="checkbox"/> Change | xxx Addition                      |  |
| NAME                       | BISPHAM, CYRUS      |                                 | 1.2 NAME           | Maxwell Jonah                                         |                                 |                                   |  |
| STREET ADDRESS             | 7359 STACY LANE     |                                 | 1.3 STREET ADDRESS | 7112 N. Serenoa Drive                                 |                                 |                                   |  |
| CITY-ST-ZIP                | SARASOTA FL 34241   |                                 | 1.4 CITY-ST-ZIP    | Sarasota, FL 34241                                    |                                 |                                   |  |
| TITLE                      | SD                  | xx DELETE                       | 2.1 TITLE          | Director                                              | <input type="checkbox"/> Change | xxx Addition                      |  |
| NAME                       | MEIRED, BO          |                                 | 2.2 NAME           | Paul Cherry                                           |                                 |                                   |  |
| STREET ADDRESS             | 3859 BEE RIDGE RD.  |                                 | 2.3 STREET ADDRESS | 6625 Taeda Drive                                      |                                 |                                   |  |
| CITY-ST-ZIP                | SARASOTA FL 34233   |                                 | 2.4 CITY-ST-ZIP    | Sarasota, FL 34241                                    |                                 |                                   |  |
| TITLE                      | D                   | <input type="checkbox"/> DELETE | 3.1 TITLE          | President/Director                                    | xxx Change                      | <input type="checkbox"/> Addition |  |
| NAME                       | SCACCHETTI, RICHARD |                                 | 3.2 NAME           | Richard Scacchetti                                    |                                 |                                   |  |
| STREET ADDRESS             | 7367 STACY LANE     |                                 | 3.3 STREET ADDRESS |                                                       |                                 |                                   |  |
| CITY-ST-ZIP                | SARSOTA FL 34241    |                                 | 3.4 CITY-ST-ZIP    |                                                       |                                 |                                   |  |
| TITLE                      |                     | <input type="checkbox"/> DELETE | 4.1 TITLE          | Treasurer/Director                                    | <input type="checkbox"/> Change | xxx Addition                      |  |
| NAME                       |                     |                                 | 4.2 NAME           | Sandra W. Stamey                                      |                                 |                                   |  |
| STREET ADDRESS             |                     |                                 | 4.3 STREET ADDRESS | 7375 Stacy Lane                                       |                                 |                                   |  |
| CITY-ST-ZIP                |                     |                                 | 4.4 CITY-ST-ZIP    | Sarasota, FL 34241                                    |                                 |                                   |  |
| TITLE                      |                     | <input type="checkbox"/> DELETE | 5.1 TITLE          | Secretary/Director                                    | <input type="checkbox"/> Change | xxx Addition                      |  |
| NAME                       |                     |                                 | 5.2 NAME           | Vincent Telesco                                       |                                 |                                   |  |
| STREET ADDRESS             |                     |                                 | 5.3 STREET ADDRESS | 7368 S. Serenoa Drive                                 |                                 |                                   |  |
| CITY-ST-ZIP                |                     |                                 | 5.4 CITY-ST-ZIP    | Sarasota, FL 34241                                    |                                 |                                   |  |
| TITLE                      | Director            | xx Addition                     | 6.1 TITLE          | Director                                              | <input type="checkbox"/> Change | xxx Addition                      |  |
| NAME                       | Thomas Chalfant     |                                 | 6.2 NAME           | Richard Booth                                         |                                 |                                   |  |
| STREET ADDRESS             | 6438 Taeda Drive    |                                 | 6.3 STREET ADDRESS | 6433 Taeda Drive                                      |                                 |                                   |  |
| CITY-ST-ZIP                | Sarasota, FL 34241  |                                 | 6.4 CITY-ST-ZIP    | Sarasota, FL 34241                                    |                                 |                                   |  |

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *[Signature]* (941)

CR2E037 (9/96)