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May 15 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT **1998**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N29102** **(3)**

1. Corporation Name

THE SERENOA COMMUNITY ASSOCIATION, INC.

Principal Place of Business	Mailing Address
7375 STACY LANE SARASOTA FL 34241 US	7375 STACY LANE SARASOTA FL 34241 US

3. Date Incorporated or Qualified: 11/03/1988

4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☒ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

LEVIN AND TANNENBAUM P.A.
JOHN FRUITVILLE RD.
STE. 102
SARASOTA FL 34236

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

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

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☒ DELETE	1.1 TITLE	SD	☒ Change ☐ Addition
NAME	JONAH, MAXWELL		1.2 NAME	BARBARA GUYER	
STREET ADDRESS	7112 N SERENOA DRIVE		1.3 STREET ADDRESS	7304 S. SERENOA	
CITY-ST-ZIP	SARASOTA FL		1.4 CITY-ST-ZIP	SARASOTA FL 34241	
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	CHERRY, PAUL		2.2 NAME		
STREET ADDRESS	6625 TAEDA DRIVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		2.4 CITY-ST-ZIP		
TITLE	PD	☒ DELETE	3.1 TITLE	D.	☒ Change ☐ Addition
NAME	SCACCHETTI, RICHARD		3.2 NAME	CHALFANT, THOMAS	
STREET ADDRESS	7367 STACY LANE		3.3 STREET ADDRESS	6438 TAEDA DR	
CITY-ST-ZIP	SARSOTA FL		3.4 CITY-ST-ZIP	SARASOTA FL	
TITLE	TD	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	STAMEY, SANDRA W		4.2 NAME		
STREET ADDRESS	7375 STACY LANE		4.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		4.4 CITY-ST-ZIP		
TITLE	SD	☐ DELETE	5.1 TITLE	PD	☒ Change ☐ Addition
NAME	TELESCO, VINCENT		5.2 NAME	TELESCO, VINCENT	
STREET ADDRESS	7368 S. SERENOA DRIVE		5.3 STREET ADDRESS	7368 S. SERENOA DR	
CITY-ST-ZIP	SARASOTA FL		5.4 CITY-ST-ZIP	SARASOTA FL	
TITLE	D	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	BOOTH, RICHARD		6.2 NAME		
STREET ADDRESS	6433 TAEDA DRIVE		6.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		6.4 CITY-ST-ZIP		

CR2E037 (10/97)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Sandra Stamey 5/5/98 (941) 923 5874
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0065815