

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 22, 2004 8:00 am
Secretary of State

03-22-2004 90301 007 ****70.00

DOCUMENT # N33354

1. Entity Name

SERENITY PLACE III CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

960 NW 45TH ST
APT B-4
POMPANO BEACH FL 33064
US

Mailing Address

960 NW 45TH ST
APT B-4
POMPANO BEACH FL 33064
US

04001010



MOORE CR2E037 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0178228

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SANTUCCI, PHILIP J
960 NW 45TH ST
APT B-4
POMPANO BEACH FL 33064

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 admits 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

3-19-04

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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
NAME SANTUCCI, PHILIP J ☐ Delete
STREET ADDRESS 960 NW 45TH ST B4
CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE VD
NAME WRIGHT, BEN ☒ Delete
STREET ADDRESS 960 NW 45TH ST B8
CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE D
NAME CAPULE, ALLEN ☐ Delete
STREET ADDRESS 1000 NW 45TH ST A5
CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE T
NAME KELLY, BETTY ☒ Delete
STREET ADDRESS 960 NW 45TH ST B1
CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE S
NAME BLIUARRO, BARBARA ☐ Delete
STREET ADDRESS 1000 N.W. 45TH ST A-1
CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD
NAME Dolan, Sam ☒ Change ☐ Addition
STREET ADDRESS 1000 NW 45th ST A-5
CITY-ST-ZIP Pompano Beach, FL 33064

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T
NAME Braun, Debra ☒ Change ☐ Addition
STREET ADDRESS 1000 NW 45th ST A-2
CITY-ST-ZIP Pompano Beach, FL 33064

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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:

Philip J. Santucci pres.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Santucci, Philip
3-19-04

Date

Daytime Phone #