

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

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90321 016 ****61.25

DOCUMENT # N33355

1. Entity Name

SERENITY PLACE IV CONDOMINIUM ASSOCIATION,
INC.



Principal Place of Business

1501 NW 45TH ST #C
POMPANO BEACH FL 33064

Mailing Address

1501 NW 45TH ST #C
POMPANO BEACH FL 33064

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

65-0136095

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DONOVAN, CAROLE
1531 NW 45TH STREET
B-6
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 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

Carole R. Donovan President

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

April 16, 2004

DATE

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 **P**
NAME DONOVAN, CAROLE ☐ Delete
STREET ADDRESS 1531 NW 45TH STREET B-6
CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE **T**
NAME BATTLES, KEMBERLY ☒ Delete
STREET ADDRESS 1531 NW 45TH STREET A-5
CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE **S**
NAME SHIRLEY, ANNE ☒ Delete
STREET ADDRESS 1501 NW 45TH STREET, A-2
CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE **D**
NAME FRISONE, GARY ☒ Delete
STREET ADDRESS 1531 NW 45TH STREET B-10
CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE **D**
NAME NOCE, MATT ☒ Delete
STREET ADDRESS 1531 NW 45TH STREET B-8
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 **V/S**
NAME LORRI HEININGER ☐ Change ☒ Addition
STREET ADDRESS 1501 NW 45TH ST A10
CITY-ST-ZIP POMPANO BEACH, FL 33064

TITLE **T**
NAME RHONDA ALBIN ☐ Change ☒ Addition
STREET ADDRESS 1531 NW 45TH ST B3
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

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:

Carole R. Donovan CAROLE DONOVAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/04

DATE

954 9433760

DAYTIME PHONE #