

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48708

FILED  
Feb 06, 2005  
Secretary of State

**Entity Name:** SERENE ACRES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

7700 ROSELAND RD  
SEBASTIAN, FL 32958

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 418  
ROSELAND, FL 32957

**New Mailing Address:**

**FEI Number:** 65-0422983

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SNOW, MARK S  
770 ROSELAND RD.  
SEBASTIAN, FL 32958 US

**Name and Address of New Registered Agent:**

SNOW, MARK S  
7700 ROSELAND ROAD  
SEBASTIAN, FL 32958 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: \_\_\_\_\_

02/06/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SNOW, MARK S  
Address: 7700 ROSELAND RD.  
City-St-Zip: SEBASTIAN, FL 32958

Title: TD ( ) Delete  
Name: SNOW, CATHY L  
Address: 7700 ROSELAND RD.  
City-St-Zip: SEBASTIAN, FL 32958

Title: SD ( ) Delete  
Name: FULTON, CATHY  
Address: 249 EASY STREET  
City-St-Zip: SEBASTIAN, FL 32958

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARK S. SNOW

PD

02/06/2005

Electronic Signature of Signing Officer or Director

Date