

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000036741

**FILED**  
**Mar 03, 2010**  
**Secretary of State**

**Entity Name:** SERENITY, LLC.

**Current Principal Place of Business:**

4010 US 1 SOUTH  
UNIT 20  
SAINT AUGUSTINE, FL 32086

**New Principal Place of Business:**

4010 US 1 SOUTH  
UNIT 20  
SAINT AUGUSTINE, FL 32086 US

**Current Mailing Address:**

4010 US 1 SOUTH  
UNIT 20  
SAINT AUGUSTINE, FL 32086

**New Mailing Address:**

4010 US 1 SOUTH  
UNIT 20  
SAINT AUGUSTINE, FL 32086 US

**FEI Number:** 20-1140893

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CAGLE, KERRI  
4010 US 1 S 20  
SAINT AUGUSTINE, FL 32086 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: P  
Name: CAGLE, KERRI  
Address: 104 TIMBERWOOD DR.  
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: VP  
Name: HIRES, SABRINA  
Address: 108 LOBELLA ST  
City-St-Zip: SAINT AUGUSTINE, FL 32086

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KERRI CAGLE

P

03/03/2010

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date