2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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Secretary of State
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Entity Name: S.I.R.E.N.S., INC.

Current Principal Place of Business:

17649 US HIGHWAY 27
CLERMONT, FL 34715

Current Mailing Address:

P.O. BOX 492934
LEESBURG, FL 34749 US

FEI Number: 81-2723770

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MILLHORN ELDER LAW PLANNING GROUP, LLC
11294 US HIGHWAY 301
OXFORD, FL 34484 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	D, P
Name	LOWERY, CLINT
Address	P.O. BOX 492934
City-State-Zip:	LEESBURG FL 34749

Title	D, V
Name	MATTINGLY, BRADLEY
Address	P.O. BOX 492934
City-State-Zip:	LEESBURG FL 34749

Title	D, S
Name	NICHOLS, CASEY
Address	P.O. BOX 492934
City-State-Zip:	LEESBURG FL 34749

Title	D, T
Name	CLARK, DAVID
Address	P.O. BOX 492934
City-State-Zip:	LEESBURG FL 34749

Title	BM
Name	CLOUGH, BRIAN
Address	P.O. BOX 492934
City-State-Zip:	LEESBURG FL 34749

Title	BM
Name	CAREY, JONATHAN
Address	P.O. BOX 492934
City-State-Zip:	LEESBURG FL 34749

Title	BM
Name	KASSAS, AMER
Address	P.O. BOX 492934
City-State-Zip:	LEESBURG FL 34749

I hereby 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 all other like empowered.

SIGNATURE: BRADLEY MATTINGLY VP 04/05/2017

Electronic Signature of Signing Officer/Director Detail — Date