

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19000004477

Entity Name: SERENITY COVE RECOVERY RESIDENCE, INC.

Current Principal Place of Business:

13843 PLEASANT VALLEY DRIVE
JACKSONVILLE, FL 32225

Current Mailing Address:

13843 PLEASANT VALLEY DRIVE
JACKSONVILLE, FL 32225 US

FEI Number: 30-0991216

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FLETCHER, KIMBERLY A
13843 PLEASANT VALLEY DRIVE
JACKSONVILLE, FL 32225 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 CHAIRMAN
Name FLETCHER, KIMBERLY A
Address 13843 PLEASANT VALLEY DRIVE
City-State-Zip: JACKSONVILLE FL 32225

Title VC
Name MCADOO, JOE E
Address 130 ANITA PLACE
City-State-Zip: MABLETON GA 30126

Title SECRETARY
Name COOK, JAMIE
Address 3015 HIDEAWAY HILLS LANE
City-State-Zip: POWDER SPRINGS GA 30127

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: KIMBERLY A FLETCHER

CHAIRMAN

04/29/2020

Electronic Signature of Signing Officer/Director Detail

Date