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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BETH O GRISWOLD

Electronic Signature of Signing Officer/Director Detail

PONTE VEDRA BEACH. FL 32082 **Current Mailing Address:** 

240 CLEARWATER DR PONTE VEDRA BEACH, FL 32082 US

**Current Principal Place of Business:** 

## FEI Number: 20-0851282

**Officer/Director Detail :** 

240 CLEARWATER DR

## Name and Address of Current Registered Agent:

GRISWOLD, BETH O 240 CLEARWATER DR. PONTE VEDRA BEACH, FL 32082 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:

SIGNATURE			

## Title Ρ Title VP Name GRISWOLD, BETH O Name GRISWOLD, DAVID S 240 CLEARWATER DR. Address 240 CLEARWATER DR Address City-State-Zip: PONTE VEDRA BEACH FL 32082 City-State-Zip:

06/10/2020 Date

Certificate of Status Desired: No

Date

PONTE VEDRA BEACH FL 32082

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT DOCUMENT# P04000038588

Entity Name: SERENDIPITY OF PONTE VEDRA, INC

PRESIDENT

Electronic Signature of Registered Agent