

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005185

Entity Name: TRANQUILITY SOLUTIONS, INC.

FILED
Apr 04, 2007
Secretary of State

Current Principal Place of Business:

901 DULANEY VALLEY RD
800
TOWSON, MD 21204

New Principal Place of Business:

Current Mailing Address:

901 DULANEY VALLEY RD
800
TOWSON, MD 21204

New Mailing Address:

FEI Number: 20-3466560

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATIONS SRVS COM.
1201 HAYES ST
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CCEP () Delete
Name: DUQUETTE, ALLISON
Address: 901 DULANEY VALLEY RD 800
City-St-Zip: TOWSON, MD 21204

Title: SRVP () Delete
Name: YANEISIN, MATHEW
Address: 901 DULANEY VALLEY RD 800
City-St-Zip: TOWSON, MD 21204

Title: TS (X) Delete
Name: YANEISIN, MATHEW
Address: 901 DULANEY VALLEY RD 800
City-St-Zip: TOWSON, MD 21204

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P C (X) Change () Addition
Name: MARSHALL, JAMES N
Address: 901 DULANEY VALLEY RD 800
City-St-Zip: TOWSON, MD 21204

Title: S (X) Change () Addition
Name: LOCKWOOD, CYNTHIA L
Address: 901 DULANEY VALLEY ROAD
City-St-Zip: TOWSON, MD 21204

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 Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CYNTHIA L. LOCKWOOD

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04/04/2007

Electronic Signature of Signing Officer or Director

Date