

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2005 8:00 am
Secretary of State

04-21-2005 90026 014 ****50.00

DOCUMENT # L04000057601 1. Entity Name THE SERENITY MANAGEMENT L.L.C.					
Principal Place of Business 6023 26TH ST. W. #271 BRADENTON, FL 34207			Mailing Address 6023 26TH ST. W. #271 BRADENTON, FL 34207		
2. Principal Place of Business 1564 Pleasant Rd. Suite, Apt. #, etc.		3. Mailing Address 1564 Pleasant Rd. Suite, Apt. #, etc.			
City & State Bradenton FL City 34207 Country Manatee		City & State Bradenton FL City 34207 Country Manatee		4. FCI Number Applied For ☒ Not Applicable	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required				04092005 Chg-LLC CR2E083 (10/03)	
6. Name and Address of Current Registered Agent KARPEL, JOHN 2808 47TH ST. W. #B BRADENTON, FL 34207			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. The above named entity submits its statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ (Signatures, typed or printed name of registered agent and title (if necessary). (P.O. Box registered agent signature required when applicable). Date					
Filing Fee is \$50.00 Due by May 1, 2005			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM VISSER, JACOB 1564 PLEASANT RD. BRADENTON, FL 34207	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KARPEL, JOHN 2808 47TH AVE. W. #B BRADENTON, FL 34207	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KARPEL, MERITA 2808 47TH AVE. W. #B BRADENTON, FL 34207	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DUVALL, SHAWN 2808 47TH AVE. W. #B BRADENTON, FL 34207	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <u>John Karpel</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					