

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005336

FILED
Apr 25, 2009
Secretary of State

Entity Name: SERENITY MISSION, INC

Current Principal Place of Business:

7909 GRASMER DRIVE
LAND O LAKES, FL 34637

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 502
LAND O LAKES, FL 34639

New Mailing Address:

FEI Number: 26-2735831

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ANTONEK, TOM PH.D.
7909 GRASMER DRIVE
LAND O LAKES, FL 34637 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

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: ANTONEK, TOM PH.D.
Address: 7909 GRASMER DRIVE
City-St-Zip: LAND O LAKES, FL 34637

Title: VP () Delete
Name: SMITH, SCOTT T JD, MA
Address: 7909 GRASMER DRIVE
City-St-Zip: LAND O LAKES, FL 34637

Title: D () Delete
Name: PARKER, KRISTIN MA
Address: 7909 GRASMER DRIVE
City-St-Zip: LAND O LAKES, FL 34637

Title: D () Delete
Name: BRADY,, KELLY LMHC,AP
Address: 7909 GRASMER DRIVE
City-St-Zip: LAND O LAKES, FL 34637

Title: D () Delete
Name: SMITH, JANICE BS, CAP
Address: 7909 GRASMER DRIVE
City-St-Zip: LAND O LAKES, FL 34637

Title: D () Delete
Name: BENSON, ANDRE W M.D.
Address: 7909 GRASMER DRIVE
City-St-Zip: LAND O LAKES, FL 34637

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ANTONEK, TOM PH.D.
Address: 7909 GRASMER DRIVE
City-St-Zip: LAND O LAKES, FL 34637

Title: () Change () Addition
Name:
Address:
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Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS C. ANTONEK, PH.D

P

04/25/2009

Electronic Signature of Signing Officer or Director

Date