

**2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Aug 28, 2012  
Secretary of State**

DOCUMENT# N11000011111

Entity Name: SERENITY ROW, INC.

**Current Principal Place of Business:**

3673 ELIZABETH STREET  
LAKE WORTH, FL 33461

**New Principal Place of Business:**

**Current Mailing Address:**

3673 ELIZABETH STREET  
LAKE WORTH, FL 33461

**New Mailing Address:**

FEI Number: 27-1175013      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

LOPEZ, ALLISON  
3673 ELIZABETH STREET  
LAKE WORTH, FL 33461      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: D  
Name: LOPEZ, ALLISON  
Address: 3673 ELIZABETH STREET  
City-St-Zip: LAKE WORTH, FL 33461

Title: D  
Name: MAURER, DOUGLAS  
Address: 13803 157TH CT N  
City-St-Zip: JUPITER, FL 33478

Title: D  
Name: MATIAS, AMELIA  
Address: 2463 SUNDY AVE  
City-St-Zip: DELRAY BEACH, FL 33444

Title: D  
Name: LOPEZ, ALLISON  
Address: 3673 ELIZABETH STREET  
City-St-Zip: LAKE WORTH, FL 33461

Title: D  
Name: LOPEZ, ALLISON  
Address: 3673 ELIZABETH STREET  
City-St-Zip: LAKE WORTH, FL 33461

Title: D  
Name: LOPEZ, ALLISON  
Address: 3673 ELIZABETH STREET  
City-St-Zip: LAKE WORTH, FL 33461

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: ALLISON LOPEZ

D

08/28/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date