1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # N95000002144

SERENDIPITY ROC, INC.

| Principal Place of Business |      |       |       |       |  |  |  |  |  |  |
|-----------------------------|------|-------|-------|-------|--|--|--|--|--|--|
| 29081                       | U.S. | HIGHW | AY 19 | NORTH |  |  |  |  |  |  |
| CLEARWATER FL 33761         |      |       |       |       |  |  |  |  |  |  |

2. Principal Place of Business

Suite, Apt. #, etc.

22

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

29081 U.S. HIGHWAY 19 NORTH **CLEARWATER FL 33761** 

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27



02-24-1999 90210 016 \*\*\*\*61.25

3. Date Incorporated or Qualifed

05/04/1995

59-3314973

4. FEI Number

| £2  |  | 121                       |                   |                                       |  | <del></del>                               |                                 |                 |                                |            |  |  |  |
|---|--|---------------------------|-------------------|---------------------------------------|--|---|---------------------------------|-----------------|--------------------------------|------------|--|--|--|
| City & Stat   | City & State City & State                            |                           |                   |                                       |  | 5. 0                                      | 5. Certifcate of Status Desired |                 | \$8.75 Additional Fee Required |            |  |  |  |
| Zip   | Country Zip C  |                           |                   | Country                               |  |   | lection Campaign Fir            | - 1             | \$5.00 (<br>Added to           | - 1        |  |  |  |
| 24  |  |                           |                   |                                       |  |   |                                 |                 |                                | 71 663     |  |  |  |
| Name and Address of Current Registered Agent  |  |                           |                   | 81                                    | Name   | 10. Name and Address of New Registered Ag |                                 |                 |                                |            |  |  |  |
|   |  |                           |                   | "                                     | Name   |   |                                 |                 |                                |            |  |  |  |
| BERNSTEIN, DAVID S ESQ.   |  |                           |                   | 82                                    | Street Address (P.O. Box Number is Not Acceptable) |   |                                 |                 |                                |            |  |  |  |
| 150 SECOND AVENUE NORTH   |  |                           |                   |                                       |  |   |                                 |                 |                                |            |  |  |  |
| SUITE 1700  |  |                           |                   | 83                                    |  |   |                                 |                 |                                |            |  |  |  |
| ST. PETERSBURG FL 33701   |  |                           |                   | 84                                    | City   | FL 85 Zip Code                            |                                 |                 |                                |            |  |  |  |
| ff. Pursuant  | to the provisions of Sections 617.0502               | and 617.1508, Florida S   | tatutes, the a    | bove                                  | -named   | corporation :                             | submits this statemer           | t for the purpo | ose of changing its            | registered |  |  |  |
| 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. |  |                           |                   |                                       |  |   |                                 |                 |                                |            |  |  |  |
| SIGNATURE   |  |                           |                   |                                       |  |   |                                 |                 |                                |            |  |  |  |
|   | Signature, typed or printed name of registered agent |                           | NOTE Registered   | Agent                                 | t signature re                                     |   | stating)<br>DDITIONS/CHANGES    |                 | NE AND DIRECTO                 | RS IN 12   |  |  |  |
| 12.   | OFFICERS AND   |                           | 13.               |                                       |  |   | DITIONS/CHANGES                 | 10 0111021      | Change                         | Addition   |  |  |  |
| TITLE   | PD   | ☐ DELET                   |                   |                                       |  | D   | WARANIUS                        |                 | A change                       |            |  |  |  |
| NAME  | BRIDE, WILLIAM M                                     |                           |                   | 1.2 NAME                              |  |   |                                 |                 | 267                            |            |  |  |  |
| STREET ADDRESS  |  |                           |                   | 1.3 STREET ADDRESS<br>1.4 CITY-ST-ZIP |  | 29081                                     | US Hwy 1                        | 9N Lot          | 367                            |            |  |  |  |
| CITY-ST-ZIP   | CLEARWATER FL  | □ DELET                   |                   |                                       | -ZIP   | стеаг                                     | <u>water Fl.</u>                | 33/01           | Change                         | Addition   |  |  |  |
| TITLE   | - טו   |                           |                   | 2.1 TITLE                             |  |   |                                 |                 |                                | _          |  |  |  |
| NAME  | THE GETTY TILLS                                      |                           |                   | 2.2 NAME                              |  |   |                                 |                 |                                |            |  |  |  |
| STREET ADDRESS 29081 US HWY 19 NORTH, LOT 351   |  |                           | B                 | 2.3 STREET ADDRESS                    |  |   | _                               |                 |                                |            |  |  |  |
| CITY-ST-ZIP   | CLEARWATER FL 33761                                  | ☐ DELET                   |                   | 2.4 CITY-ST-ZIP                       |  |   |                                 |                 | ☐ Change                       | Addition   |  |  |  |
| TITLE   | - Τ  |                           |                   | 3.1 TITLE                             |  |   |                                 |                 |                                |            |  |  |  |
| NAME !  | LAWSON TOM   |                           |                   | 3.2 NAME<br>3.3 STREET ADDRESS        |  |   |                                 |                 |                                |            |  |  |  |
| STREET ADDRESS  |  |                           |                   |                                       | 1  |   |                                 |                 |                                |            |  |  |  |
| CITY-ST-ZIP   | CLEARWATER FL  | ☐ DELET                   |                   | TY-ST                                 | T-ZIP  |   |                                 |                 | Change                         | Addition   |  |  |  |
| TITLE   | SD SARRA BARBARA                                     | □ berei                   | 1                 |                                       |  |   |                                 |                 | C 200.90                       |            |  |  |  |
| NAME  | FINNICUM, BARBARA J                                  |                           | 4.21              |                                       | 4000000  |   |                                 |                 |                                |            |  |  |  |
| STREET ADDRESS  | 29081 US HWY 19N LOT 137                             |                           |                   |                                       | ADDRESS  |   |                                 |                 |                                |            |  |  |  |
| CITY-ST-ZIP   | CLEARWATER FL DELETE                                 |                           |                   | ITY-ST                                | -ZIP   |   |                                 |                 | Change                         | Addition   |  |  |  |
| TITLE   | VP   |                           | Έ 5.1 Ti<br>5.2 N |                                       |  |   |                                 |                 |                                |            |  |  |  |
| NAME  | PORTEOUS DON   |                           |                   |                                       | ADDRESS  |   |                                 |                 |                                |            |  |  |  |
| STREET ADDRESS  | 29081 US HWY 19N LOT 172                             |                           | - 1               | IY-ST                                 | - 1  |   |                                 |                 |                                | }          |  |  |  |
| CITY-ST-ZIP   | CLEARWATER FL  | <b>₹</b> DELET            |                   |                                       | - 415  |   |                                 |                 | ☐ Change                       | Addition   |  |  |  |
| TITLE   | U — · · · ·  |                           |                   | 6.2 NAME                              |  |   |                                 |                 |                                |            |  |  |  |
| NAME  | WHITE, RUTH  | A.=                       |                   |                                       | ADDRESS  |   |                                 |                 | _                              | {          |  |  |  |
| STREET ADDRESS  |  | <b>21</b> 7               | •                 |                                       |  |   |                                 |                 | •                              |            |  |  |  |
| CITY-ST-ZIP   | CLEARWATER FL 33761                                  | this films does not quali |                   | ITY-ST                                |  | in Coation                                | 119 07/3\(i) Florida S          | tatutos I furti | er certify that the in         | nformation |  |  |  |

Indicated on this annual report or supplied with this ming does not quality for the exemption stated in Section 1.19.07(3)(i), Fronda Statutes. I further certay that the information indicated on this annual report is rupelemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the preceiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

127-784-2675

Applied For

Not Applicable