2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002144

Entity Name: SERENDIPITY ROC, INC.

FILED Mar 23, 2009 Secretary of State

Current P	rincipal Place o	of Business:	New Prin	New Principal Place of Business:		
29081 U.S	IOME PARK 3. HWY. 19 NOR ATER, FL 33761					
Current Mailing Address:			New Mail	New Mailing Address:		
29081 U.S	IOME PARK 5. HWY. 19 NOR ATER, FL 3376					
FEI Number	: 59-3314973	FEI Number Applied For ()	FEI Number Not App	olicable () Certificate of State	us Desired()	
Name and	l Address of Cເ	rrent Registered Agent:	Name and	d Address of New Registered	Agent:	
CARSON, KENNETH 29081 U.S. HWY. 19 NORTH, LOT #249 CLEARWATER, FL 33761 US			29081 U.S	DASHIELL, DONALD 29081 U.S. HWY. 19 NORTH, LOT #400 CLEARWATER, FL 33761 US		
	e named entity su e of Florida.	bmits this statement for the p	ourpose of changing	its registered office or registered	d agent, or both,	
SIGNATURE: DONALD DASHIELL				03/23/200	9	
	Electronic	Signature of Registered Age	ent	Date		
OFFICER	S AND DIRECT	ORS:	ADDITIO	NS/CHANGES TO OFFICERS A	AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P () E HOGAN, TERRAN 29081 US HWY CLEARWATER, I	9N LOT 229	Title: Name: Address: City-St-Zip:	()Change ()Addition	1	
Title: Name: Address: City-St-Zip:	CARSON, KENNE	19 NORTH LOT 249	Title: Name: Address: City-St-Zip:	T (X) Change () Addition RIZOK, EUGENE 299081 US HWY 19 NORTH LOT 13 CLEARWATER, FL 33761		
Title: Name: Address: City-St-Zip:	LATHROP, KEITH	9 NORHT LOT 220	Title: Name: Address: City-St-Zip:	()Change ()Addition	1	
Title: Name: Address: City-St-Zip:	HALL, DAVE	Delete 9 NORTH LOT 217 FL 33761	Title: Name: Address: City-St-Zip:	()Change ()Addition	1	
Title: Name: Address: City-St-Zip:	SCHULZ, DIANA	Delete 9 NORTH LOT 2440 -L 33761	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition SCHULZ, DIANA 29081 US HWY 19 NORTH LOT 244 CLEARWATER, FL 33761		
Title: Name: Address:	D () [TRIPP, KENNETH 29081 US HWY 1		Title: Name: Address:	() Change () Addition	1	

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.

City-St-Zip:

SIGNATURE: TERRENCE HOGAN PRES 03/23/2009

City-St-Zip:

CLEARWATER, FL 33761