2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2009
Secretary of State

DOCUMENT# N96000005312

Entity Name: SERENITY FAMILY AND CHILDREN SERVICES CORPORATION

Current Principal Place of Business:

512 N. W. 22ND AVENUE
FORT LAUDERDALE, FL 33311 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX #8215
FORT LAUDERDALE, FL 33310 US

New Mailing Address:

FEI Number: 65-0699484 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BLACK-BARRON, KAREN E ESQ
5440 N STATE ROAD 7
SUITE #220
NORTH LAUDERDALE, FL 33319 US

Name and Address of New Registered Agent:

FOREMAN, TIARA T
3011 N.W. 21ST STREET
FORT LAUDERDALE, FL 33311 US

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: TIARA T. FOREMAN 05/04/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PCM ( ) Delete
Name: GRAY-WILLIAMS, JANA' A
Address: 512 NW 22ND AVE
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: DS ( ) Delete
Name: WILLIAMS, JULIET G
Address: 3021 NW 21ST STREET
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: D ( ) Delete
Name: ISOM, CHEYENNE
Address: 3011 NW 21 STREET
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: VTD ( ) Delete
Name: GRAY, JUANITA A
Address: 3011 NW 21ST ST
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: D ( ) Delete
Name: BRADFORD, MATTAIR G
Address: 3010 NW 23RD STREET
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: TSD ( ) Delete
Name: DIXSON, CYD C
Address: 3241 NW 13TH COURT
City-St-Zip: FT LAUDERDALE, FL 33311

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: ( ) Change ( ) Addition
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: JANA' GRAY WILLIAMS PCM 05/04/2009
Electronic Signature of Signing Officer or Director Date