

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000155897

FILED
Jun 22, 2009
Secretary of State

Entity Name: SERENITY RANCH & EQUESTRIAN CENTER, NC.

Current Principal Place of Business:

4773 E STAGE COACH TRAIL
FLORAL CITY, FL 34336

New Principal Place of Business:

Current Mailing Address:

4773 E STAGE COACH TRAIL
FLORAL CITY, FL 34336

New Mailing Address:

FEI Number: 20-8109976

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEGALL, LARRY M
3321 HENDERSON BLVD
TAMPA, FL 33609 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MEROLA, ELSA
Address: 4773 E STAGE COACH TRAIL
City-St-Zip: FLORAL CITY, FL 34336

Title: VPD () Delete
Name: WELCHA, MARLENA M
Address: 976 S ROOKS AVE
City-St-Zip: INVERNESS, FL 34453

Title: STD () Delete
Name: MEROLA, SALVATORE R
Address: 4773 E STAGE COACH TRAIL
City-St-Zip: FLORAL CITY, FL 34336

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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SALVATORE R.MEROLA

TREA

06/22/2009

Electronic Signature of Signing Officer or Director

Date