

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000084411

1. Entity Name
SERENITY DAY SPA, INC.



FILED
May 01, 2003 8:00 am
Secretary of State
05-01-2003 90816 012 ***150.00

0642527 AT

Principal Place of Business
1031 N COMMERCE TERR
CRYSTAL RIVER FL 34429

Mailing Address
PO BOX 409
LECANTO FL 34460



2. Principal Place of Business
1031 N. Commerce Terr.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Lecanto FL

City & State

4. FEI Number 59-3604155

Applied For
Not Applicable

Zip
34461

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DOYLE-JORDAN, ELIZABETH
430 NE 13TH ST
CRYSTAL RIVER FL 34428

Name Doyle-Jordan, Elizabeth
Street Address (P.O. Box Number is Not Acceptable)
2298 W. Middle Ln.
City Lecanto FL Zip Code 34461

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE E.M. Doyle-Jordan

DATE 4-28-03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME JORDAN, BRETLEE B
STREET ADDRESS 430 NE 13TH ST
CITY-ST-ZIP CRYSTAL RIVER FL 34428

TITLE
NAME Jordan, Bretlee B
STREET ADDRESS 2298 W. Middle Ln.
CITY-ST-ZIP Lecanto FL 34461

TITLE D
NAME DOYLE-JORDAN, ELIZABETH
STREET ADDRESS 430 NE 13TH ST
CITY-ST-ZIP CRYSTAL RIVER FL 34428

TITLE
NAME Doyle-Jordan, Elizabeth
STREET ADDRESS 2298 W. Middle Ln.
CITY-ST-ZIP Lecanto FL 34461

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CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: E.M. Doyle-Jordan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date 4-28-03
Daytime Phone 746-1156

CR2E034 (10/02)