

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000101368

FILED  
Mar 24, 2009  
Secretary of State

Entity Name: SERENITY INVESTMENT AND SERVICES CORP

**Current Principal Place of Business:**

11102 AVERY OAKS DRIVE  
TAMPA, FL 33625 US

**New Principal Place of Business:**

**Current Mailing Address:**

11102 AVERY OAKS DRIVE  
TAMPA, FL 33625 US

**New Mailing Address:**

FEI Number: 26-0887194

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CHABRIER, ROBERT L  
11102 AVERY OAKS DRIVE  
TAMPA, FL 33625 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: CHABRIER, ROBERT L  
Address: 11102 AVERY OAKS DRIVE  
City-St-Zip: TAMPA, FL 33625 US

Title: VP ( ) Delete  
Name: CHABRIER, LINDA  
Address: 11102 AVERY OAKS DRIVE  
City-St-Zip: TAMPA, FL 33625 US

Title: M ( ) Delete  
Name: CHABRIER, LOUIS  
Address: 11102 AVERY OAKS DRIVE  
City-St-Zip: TAMPA, FL 33625 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VP (X) Change ( ) Addition  
Name: CHABRIER, LINDA  
Address: 287 PORTO VECCHIO WAY  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: M (X) Change ( ) Addition  
Name: CHABRIER, LOUIS  
Address: 234 CAUSEWAY STREET, APT. 903  
City-St-Zip: BOSTON, MA 02114 US

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: ROBERT CHABRIER

P

03/24/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date