

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000002463

Entity Name: THE SERAPHIM CENTER, INC.**Current Principal Place of Business:**3311 NW 37TH STREET
GAINESVILLE, FL 32605**Current Mailing Address:**3311 NW 37TH STREET
GAINESVILLE, FL 32605 US**FEI Number:** 46-4968087**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MOORE, JANET
3311 NW 37TH STREET
GAINESVILLE, FL 32605 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	P, T, S
Name	MOORE, JANET C.
Address	3311 NW 37TH STREET
City-State-Zip:	GAINESVILLE FL 32605

Title	OFFICER
Name	ESTLING, ERIC EMMANUEL
Address	3311 NW 37TH STREET
City-State-Zip:	GAINESVILLE FL 32605

Title	VP
Name	SNOW, RANDY
Address	7830 NW 21 WAY
City-State-Zip:	GAINESVILLE FL 32609

Title	DIRECTOR
Name	SNOW, MAGGIE
Address	7830 NW 21 WAY
City-State-Zip:	GAINESVILLE FL 32609

Title	DIRECTOR
Name	MAURER, SARAH
Address	5600 NW 33 ST.
City-State-Zip:	GAINESVILLE FL 32653

Title	DIRECTOR
Name	HANNA, TOM
Address	3640 NW 105 WAY
City-State-Zip:	GAINESVILLE FL

I hereby 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 all other like empowered.

SIGNATURE: JANET CLAIRE MOORE**PRESIDENT****01/20/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date