

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005312

Entity Name: SERENITY FAMILY AND CHILDREN SERVICES CORPORATION**Current Principal Place of Business:**512 N. W. 22ND AVENUE
FORT LAUDERDALE, FL 33311**Current Mailing Address:**P. O. BOX #8215
FORT LAUDERDALE, FL 33310 US**FEI Number:** 65-0699484**Certificate of Status Desired:** Yes**Name and Address of Current 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

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

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

Title	D
Name	WILLIAMS, LARRY G
Address	512 NW 22ND AVENUE
City-State-Zip:	FT. LAUDERDALE FL 33311

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

Title	ASST. SECRETARY
Name	KELLY-RAWLS, VELVA M
Address	560 W. DAYTON CIRCLE
City-State-Zip:	FORT LAUDERDALE FL 33311

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: JANA' A. GRAY-WILLIAMS

PCM

05/01/2014

Electronic Signature of Signing Officer/Director Detail

Date