

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L75264** (6)

1. Corporation Name

RENAISSANCE INSTITUTE OF PALM BEACH, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 13 11 9:00

Principal Place of Business

%SIDNEY HARRY GOODMAN
7300 N FEDERAL HWY STE 201
BOCA RATON FL 33487

Mailing Address

%SIDNEY HARRY GOODMAN
7300 N FEDERAL HWY STE 201
BOCA RATON FL 33487

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/16/1990	3a. Date of Last Report 02/23/1994
4. FEI Number 65-0194094	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business 21 Suits, Apt. #, etc. 22 City & State 23 Zip Country 24	2a. Mailing Address 25 Suits, Apt. #, etc. 26 City & State 27 Zip Country 28
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9. Name and Address of Current Registered Agent

GOODMAN, SIDNEY HARRY
4450 NW 28TH AVENUE
BOCA RATON FL 33434

10. Name and Address of New Registered Agent

81 Name **Sidney Harry Goodman**
82 Street Address (P.O. Box Number is Not Acceptable)
1351 Sycamore Terrace
83
84 City **Boca Raton** FL 85 Zip Code **33486**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title of corporation

(Signature, typed or printed name of registered agent and title of corporation)

(Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	D GOODMAN, SIDNEY HARRY 4450 NW 28TH AVENUE BOCA RATON FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY, ST, ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP	D KUIVER, GARTH WALKES 22 NW 24TH COURT DELRAY BEACH FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY, ST, ZIP	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY, ST, ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY, ST, ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY, ST, ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY, ST, ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption provided in Section 199.032(5)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 appointed to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sidney Harry Goodman
CEO & President

1/9/95 907-241-7977