2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2005
Secretary of State

DOCUMENT# N49255

Entity Name: NORTHWOOD RENAISSANCE INC.

Current Principal Place of Business:

510 A 24TH ST
WEST PALM BEACH, FL 33407 US

New Principal Place of Business:

Current Mailing Address:

510 A 24TH ST
WEST PALM BEACH, FL 33407 US

New Mailing Address:

FEI Number: 65-0352279 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LEWIS, LONGMAN & WALKER
1700 PALM BEACH LAKES BLVD.
WEST PALM BEACH, FL 33407 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

OFFICERS AND DIRECTORS:

Title:	PRES	( ) Delete
Name:	FLICK, CARL A	
Address:	221 34TH ST.	
City-St-Zip:	WEST PALM BEACH, FL 33407	
Title:	AP	( ) Delete
Name:	PACE, ANITA	
Address:	1457 N. MANGONIA	
City-St-Zip:	WEST PALM BEACH, FL 33407	
Title:	SEC	( ) Delete
Name:	STARKE, BETTE ANNE	
Address:	213 29TH ST.	
City-St-Zip:	WEST PALM BEACH, FL 33407	
Title:	TREA	( ) Delete
Name:	FOX, TERRY	
Address:	777 SOUTH FLAGLER	
City-St-Zip:	WEST PALM BEACH, FL 33401	
Title:	ATRE	(X) Delete
Name:	FRECHETTE, WAYNE	
Address:	4520 BROADWAY	
City-St-Zip:	WEST PALM BEACH, FL 33407	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	AP	(X) Change ( ) Addition
Name:	LOYLESS, JENNIFER	
Address:	521 38TH STREET	
City-St-Zip:	WEST PALM BEACH, FL 33407	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: CARL A. FLICK PRES 01/04/2005

Electronic Signature of Signing Officer or Director — Date