2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004008

FILED Mar 27, 2009 Secretary of State

Entity Name: RENAISSANCE CONDOMINIUM ASSOCIATION OF SARASOTA, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	DEN GATE POI	NT DRIVE			
#7 SARASOT	ΓA, FL 34236	US			
Current N	lailing Addres	s:	New Mailing Addres	s:	
	DEN GATE POI	NT DRIVE			
#7 SARASOT	ΓA, FL 34236	US			
El Number	: 98-0438331	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:	
378 GOLE #2 BADASO1	TA EL 24226 I				
#2 SARASOT The above n the Stat	e of Florida.	JS	purpose of changing its registere	ed office or registered agent, or both,	
#2 SARASOT The above n the Stat	e named entity s e of Florida. RE:	JS		ed office or registered agent, or both, Date	
#2 SARASOT The above n the Stat SIGNATU	e named entity s e of Florida. RE:	JS submits this statement for the ic Signature of Registered Ag	ent		
#2 SARASOT The above n the Stat SIGNATU	e named entity se of Florida. RE: Electron S AND DIREC	JS submits this statement for the ic Signature of Registered Ag TORS: Delete ALE EATE POINT DR	ent	Date	
#2 SARASOT The above In the Stat SIGNATU OFFICER Title: Name: Address:	e named entity se of Florida. RE: Electron S AND DIREC* DP () MCCALLUM, DA 378 GOLDEN G SARASOTA, FL DV () PERRY, LOIS	JS submits this statement for the submits this statement for the ic Signature of Registered Ag TORS: Delete ALE MATE POINT DR 34236 Delete MATE POINT DRIVE	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR	

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DALE MCCALLUM P 03/27/2009