2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009028

PALM HARBOR, FL 34684

City-St-Zip:

FILED Jul 05, 2007 Secretary of State

| Entity Nar | me: RENEWING YOUR TEMPLE INC. | | | |
|--|---|--|--|--|
| Current Principal Place of Business: | | New Principal Place of Business: | | |
| 11730 N DALE MABRY HWY TAMPA, FL 33618 | | 15511 NORTH FLORIDA AVE. UNIT C-3 TAMPA, FL 33613 | | |
| Current Mailing Address: | | New Mailing Address: | | |
| 11730 N DALE MABRY HWY TAMPA, FL 33618 | | 15511 NORTH FLORIDA AVE. UNIT C-3 TAMPA, FL 33613 | | |
| FEI Number: In accordance | FEI Number Applied For (X) ce with s. 607.193(2)(b), F.S., the corporation di | FEI Number Not Applicable () Certificate of Status Desired In not receive the prior notice. | ed () | |
| Name and | Address of Current Registered Agent: | Name and Address of New Registered Agent: | | |
| TAYLOR, SAMANTHA 11730 N DALE MABRY HWY TAMPA, FL 33618 US | | TAYLOR, SAMANTHA 15511 NORTH FLORIDA AVE. UNIT C-3 TAMPA, FL 33613 US | 15511 NÓRTH FLORIDA AVE. UNIT C-3 | |
| | named entity submits this statement for the of Florida. | ne purpose of changing its registered office or registered agent | , or both, | |
| SIGNATURE: | | 07/05/2007 | 07/05/2007 | |
| | Electronic Signature of Registered | Agent Date | | |
| OFFICERS AND DIRECTORS: | | ADDITIONS/CHANGES TO OFFICERS AND DI | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | D () Delete TAYLOR, SAMANTHA 12344 NEELD ST WEEKI WACHEE, FL 34614 | Title: () Change () Addition Name: Address: City-St-Zip: | | |
| Title: Name: Address: City-St-Zip: | D () Delete COUSINO, JAMIE 509 PALMETTO ST DUNEDIN, FL 34698 | Title: () Change () Addition Name: Address: City-St-Zip: | | |
| Title: Name: Address: | D () Delete SMITH, SONDRA 3863 WILDWOOD CT #212 | Title: () Change () Addition Name: Address: | | |

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.

City-St-Zip:

SIGNATURE: SAMANTHA TAYLOR **PRES** 07/05/2007