

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003184

FILED
Apr 30, 2009
Secretary of State

Entity Name: PETE RENNER FOUNDATION, INC.

Current Principal Place of Business:

3205 46 STREET SW
LEHIGH ACRES, FL 33976

New Principal Place of Business:

3205 46TH STREET SW
LEHIGH ACRES, FL 33976

Current Mailing Address:

3205 46 STREET SW
LEHIGH ACRES, FL 33976

New Mailing Address:

3205 46TH STREET SW
LEHIGH ACRES, FL 33976

FEI Number: 20-4539808

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RENNER, TIMOTHY B
3205 46 ST S. W.
LEHIGH ACRES, FL 33976 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: PT () Delete
Name: RENNER, TIM
Address: 3205 46 STREET SW
City-St-Zip: LEHIGH ACRES, FL 33976

Title: S () Delete
Name: RENNER, ANDY
Address: 3205 46 STREET SW
City-St-Zip: LEHIGH ACRES, FL 33976

Title: V () Delete
Name: RENNER, BERNIE
Address: 3205 46 STREET SW
City-St-Zip: LEHIGH ACRES, FL 33976

Title: T () Delete
Name: RENNER, PETE
Address: 3205 46 STREET SW
City-St-Zip: LEHIGH ACRES, FL 33976

Title: T () Delete
Name: RENNER, MATT
Address: 3205 46 STREET SW
City-St-Zip: LEHIGH ACRES, FL 33976

Title: T (X) Delete
Name: LOWE, RHONDA
Address: 3205 46 ST S.W.
City-St-Zip: LEHIGH ACRES, FL 33976

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: MCKENZIE, EUDORA
Address: 3205 46 STREET SW
City-St-Zip: LEHIGH ACRES, FL 33976

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: VAUGHN, THOMAS
Address: 3205 46 STREET SW
City-St-Zip: LEHIGH ACRES, FL 33976

Title: T (X) Change () Addition
Name: VALENTINE, DOMENIC
Address: 3205 46 STREET SW
City-St-Zip: LEHIGH ACRES, FL 33976

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: TIMOTHY RENNER

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date