

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706174

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: RENAISSANCE CENTER, INC.

## Current Principal Place of Business:

900 UNIVERSITY BLVD N  
STE 700  
JACKSONVILLE, FL 32211 US

## Current Mailing Address:

P O BOX 19249  
JACKSONVILLE, FL 32245 US

## New Principal Place of Business:

10550 DEERWOOD PARK BOULEVARD  
STE 600  
JACKSONVILLE, FL 32256 US

## New Mailing Address:

FEI Number: 59-1022113      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SOMMERS, ROBERT A PHD M  
900 UNIVERSITY BLVD N  
STE 700  
JACKSONVILLE, FL 32211 US

## Name and Address of New Registered Agent:

SOMMERS, ROBERT A PHD M  
10550 DEERWOOD PARK BOULEVARD  
STE 600  
JACKSONVILLE, FL 32256 US

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: ROBERT A SOMMERS

03/23/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DT ( ) Delete  
Name: BASS, ROBIN  
Address: 4115 ALHAMBRA DRIVE WEST  
City-St-Zip: JACKSONVILLE, FL 32207

Title: SD ( ) Delete  
Name: LECLERC, DONALD  
Address: 236 HOLLY COURT  
City-St-Zip: JACKSONVILLE, FL 32218

Title: D ( ) Delete  
Name: JOHNSON, HENRY  
Address: 8933 ELIZABETH FALLS DRIVE  
City-St-Zip: JACKSONVILLE, FL 32225

Title: VCD ( ) Delete  
Name: OWEN, GEORGE  
Address: 10245 CENTURION PARKWAY, STE 200  
City-St-Zip: JACKSONVILLE, FL 32256

Title: PD ( ) Delete  
Name: SOMMERS, ROBERT  
Address: 900 UNIVERSITY BLVD N, STE 700  
City-St-Zip: JACKSONVILLE, FL 32211

Title: CD ( ) Delete  
Name: BREW, RICHARD  
Address: P. O. BOX 10209  
City-St-Zip: JACKSONVILLE, FL 32247

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change ( ) Addition  
Name: JARRETT, MARY  
Address: 1633 RIVERSIDE AVENUE  
City-St-Zip: JACKSONVILLE, FL 32204

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

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

Title: PD (X) Change ( ) Addition  
Name: SOMMERS, ROBERT A  
Address: 10550 DEERWOOD PARK BOULEVARD  
City-St-Zip: JACKSONVILLE, FL 32256

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: ROBERT A SOMMERS

DP

03/23/2009

Electronic Signature of Signing Officer or Director

Date