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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996
DOCUMENT #

726114

(2)

THE RENAISSANCE OF POMPANO BEACH III, INC.

Principal Place of Business

Mailing Address

1361 S. OCEAN BLVD. POMPANO BEACH FLORIDA 33062-7159 1361 S. OCEAN BLVD. POMPANO BEACH FLORIDA 33062-7159



						Date Incorporated or Qualified     04/13/1973		te of Las 04/20/	
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number		<u> </u>	Applied For
21		26				59-2138639			Not Applicable
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.						\$8.7	5 Additional
22		27				5. Certificate of Status Desired			Required
City & State		City & State				6. Election Campaign Financing		\$5.0	00 May Be
23		28				Trust Fund Contribution			ed to Fees
Zip 24	Country 25	Zip	Cou	intry		8. This corporation has liability fo			s. 199.032,
.41	9. Name and Address of Curren	1 Registered Agent	[30]			Florida Statutes	☐ Yes ☐		
	S. Italia and records of Conton	t Hogisteled Agent		81 N	ame	10. Name and Address of New	Registered A	lgent	
OEDCTI I	E POCEN MOOVOUNTE O MOO	00		"					
GERSTLE, ROSEN, MOSKOWITZ & ASSOC. 19495 BISCAYNE BLVD. STE. #705				82 Street Address (P.O. Box Number is Not Accepte			ible)		
			83			<del></del>	• • • • • • • • • • • • • • • • • • • •		
	RAS FL 33180		•						
AVENTU	MAS PL 33180		ļ	84 C	ty			85 Z	ip Code
11 Pursuant to	o the provisions of Sections 617.0502	and 617 1500 Florida Stat.	100 400 000				FL		<u></u>
SIGNATURE _	ed agent, or both, in the State of Floric h, and accept the obligations of, Secti Signature, typed or printed name of registered agent.	on orr.0505, Florida Statute	98. 					registere	d agent. I am
12.	OFFICERS AND		IOTE: Registered	Agent sign	ature required w		DATE COCCO	DIDEAT	200 11 10
TITLE	D					ADDITIONS/CHANGES TO OF	FICERS AND		
		1 1051535	1 1 7 11	TI E	100	L D	_		The Annual Street
	<u></u>	DELETE	1.1 TIT		P			] Change	Addition
NAME	SWAINE, ART		1.2 NA	ME				] Change	Addition
NAME STREET ADDRESS	SWAINE, ART 1361 S. OCEAN BLVD.	Pherese	1.2 NA 1.3 STI	ame Reet adda	130 136	RRY TRACHT I S. DCELN BLVD.	_	] Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	SWAINE, ART	_	1.2 NA 1.3 STI 1.4 CII	ame Reet adde Ty-St-Zif	130 136		33062		
NAME STREET ADDRESS CHY-ST-ZIP TITLE	SWAINE, ART 1361 S. OCEAN BLVD. POMPANO BEACH FL V	DELETE	1.2 NA 1.3 STI 1.4 CO 2.1 TIT	AME REET ADDA TY-ST-ZIF TLE	130 136	RRY TRACHT I S. DCELN BLVD.	33062	] Change	Addition
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NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS	SWAINE, ART 1361 S. OCEAN BLVD. POMPANO BEACH FL V LEVINSON, RICK 1361 S. OCEAN BLVD.	_	1 2 NA 1.3 STI 1.4 CII 2.1 TII 2.2 NA 2.3 STI	AME REET ADDA TY-ST-ZIF TLE AME REET ADDA	PO)	RRY TRACHT I S. DCELN BLVD.	33062		
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NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	SWAINE, ART 1361 S. OCEAN BLVD. POMPANO BEACH FL V LEVINSON, RICK 1361 S. OCEAN BLVD. POMPANO BCH. FL 33062 S IRWIN, MARCI	DELETE	12 NA 1.3 STI 1.4 CII 2.1 TII 2.2 NA 2.3 STI 2.4 CI 3.1 TII 3.2 NAI	REET ADDA TY-ST-ZIF TLE MAE REET ADDA TY-ST-ZII TLE	PARESS 136 POI	RRY TRACHT I S. DCELN BLVD.	33062	] Change	☐ Addition
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NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME NAME NAME NAME NAME	SWAINE, ART 1361 S. OCEAN BLVD. POMPANO BEACH FL V LEVINSON, RICK 1361 S. OCEAN BLVD. POMPANO BCH. FL 33062 S IRWIN, MARCI 1361 S. OCEAN BLVD. POMPANO BCH. FL 33062 T KOHN, PHIL 1361 S. OCEAN BLVD. POMPANO BCH FL 33062 D BARON, CONNIE 1361 S. OCEAN BLVD. POMPANO BCH. FL 33062 D TART, TAMMY	☐ DELETE ☐ DELETE	1.2 NA 1.3 STI 1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2.4 CIT 3.1 TIT 4.2 NA 4.3 STI 4.4 CIT 5.1 TIT 5.2 NAI 5.3 STIP 5.4 CIT 6.1 TITI 6.2 NAI	AME REET ADDA IY-ST-ZIA ILE REET ADDA ITY-ST-ZIA ILE ME REET ADDA ITY-ST-ZIA ILE AME REET ADDA ITY-ST-ZIA ILE ME REET ADDA ITY-ST-ZIA ILE ME REET ADDA ITY-ST-ZIA ILE ME REET ADDA ITY-ST-ZIA ITY-ST-ZIA ITY-ST-ZIA ITY-ST-ZIA	RESS POLICES P	RRY TRACHT I S. DCEAN BLVD. MPANN BEACH, FL	<b>33062</b>	Change Change Change	Addition  Addition  Addition
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certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed or organ attachment with an address.

SIGNATURE:

ATUS AND TYPED OR POSTED WHE OF SIGNING OFFICER OR DIRECTOR

6 (954)946-7031