

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90101 045 ****61.25

DOCUMENT # 726114

1. Corporation Name

THE RENAISSANCE OF POMPANO BEACH III, INC.

Principal Place of Business

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

Mailing Address

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

414266-90101-45



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

3. Date Incorporated or Qualified

04/13/1973

4. FEI Number

59-2138639

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

GERSTLE, ROSEN, MOSKOWITZ & ASSOC.
19495 BISCAYNE BLVD.
STE. #705
AVENTURAS FL 33180

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DV ☐ DELETE

NAME SWAINE, ART
STREET ADDRESS 1361 S OCEAN BLVD #907
CITY-ST-ZIP POMPANO BEACH FL

TITLE S ☐ DELETE

NAME LEVINSON, RICK
STREET ADDRESS 1361 S OCEAN BLVD #603
CITY-ST-ZIP POMPANO BCH. FL 33062

TITLE S ☒ DELETE

NAME IRWIN, MARCI
STREET ADDRESS 1361 S OCEAN BLVD #108
CITY-ST-ZIP POMPANO BCH. FL 33062

TITLE TD ☐ DELETE

NAME KOHN, PHIL
STREET ADDRESS 1361 S OCEAN BLVD #508
CITY-ST-ZIP POMPANO BCH FL 33062

TITLE D ☐ DELETE

NAME CULLEN, GARY
STREET ADDRESS 1361 S OCEAN BLVD #610
CITY-ST-ZIP POMPANO BCH FL

TITLE PD ☐ DELETE

NAME TRACHT, BARRY
STREET ADDRESS 1361 S OCEAN BLVD #1008
CITY-ST-ZIP POMPANO BCH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

NAME Williams, Nikolette Adam
1.2 NAME 1361 S ocean Blvd #905
1.3 STREET ADDRESS Pompano Beach FL 33062
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition

NAME Keating, William
2.2 NAME 1361 S Ocean Blvd # 909
2.3 STREET ADDRESS Pompano Beach FL 33062
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature] REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/21/99

(954) 946-7031

CR2E037 (11/98)