

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726114

FILED
Apr 27, 2009
Secretary of State

Entity Name: THE RENAISSANCE OF POMPANO BEACH III, INC.

Current Principal Place of Business:

1361 S. OCEAN BLVD.
SUITE #609
POMPANO BEACH, FL 330627159

New Principal Place of Business:

Current Mailing Address:

1361 S. OCEAN BLVD.
SUITE #609
POMPANO BEACH, FL 330627159

New Mailing Address:

FEI Number: 59-2138639 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALLIS & WALLIS, P.A.
1600 SOUTH FEDERAL HWY.
SUITE 600
POMPANO BEACH, FL 33062 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: DP () Delete
Name: DELGADO, EDUARDO
Address: 1361 S. OCEAN BLVD. #609
City-St-Zip: POMPANO BEACH, FL 33062

Title: DT () Delete
Name: YAFFE, SAMUEL
Address: 1361 S. OCEAN BLVD. #1007
City-St-Zip: POMPANO BCH., FL 33062

Title: DV () Delete
Name: SISLER, BARRY
Address: 1361 S. OCEAN BLVD. #309
City-St-Zip: POMPANO BEACH, FL 33062

Title: DS () Delete
Name: LACK, JOHN
Address: 1361 S. OCEAN BLVD. #610
City-St-Zip: POMPANO BEACH, FL 33062

Title: D () Delete
Name: FAJNGOLD, ROMAN
Address: 1361 S. OCEAN BLVD. #1008
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: SAMUEL YAFFE

DT

04/27/2009

Electronic Signature of Signing Officer or Director

_____ Date