

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 09, 2004 8:00 am
Secretary of State

02-09-2004 90023 020 ****61.25

DOCUMENT # 726115

1. Entity Name

THE RENAISSANCE OF POMPANO BEACH II, INC.



Principal Place of Business

1370 S. OCEAN BLVD.
POMPANO BEACH FL 33062

Mailing Address

1370 S. OCEAN BLVD.
POMPANO BEACH FL 33062

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1762470

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required



MOORE

CR2E037 (11/03)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BECKER & POLIAKOFF
311 STIRLING RD.
FORT LAUDERDALE FL 33312

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD POLIZZI, BARBARA 1370 SOUTH OCEAN BOULEVARD POMPANO BEACH FL 33062	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVPD MADEY, ROBERT 1370 SOUTH OCEAN BOULEVARD POMPANO BEACH FL 33062	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PACE, CHARLES 1370 S OCEAN BLVD POMPANO BEACH FL 33062	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD RISK, SAM 1370 S OCEAN BLVD POMPANO BEACH FL 33062	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ESTELLE, LUCIA 1370 SOUTH OCEAN BOULEVARD POMPANO BEACH FL 33062	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JACKSON, JUDY 1370 SOUTH OCEAN BOULEVARD POMPANO BEACH FL 33062	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUSTIG, SHER SAME	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PLOTKA, RICHARD SAME	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD ESTELLE, LUCIA SAME	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JACKSON, JUDY SAME	☒ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Barbara A. Polizzi, President 1-27-04 954-781-8200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #