

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008019

FILED  
Feb 08, 2012  
Secretary of State

**Entity Name:** RENAISSANCE FENCING FOUNDATION INC.

**Current Principal Place of Business:**

1600 LITTLE SPARROW CT  
WINTER SPRINGS, FL 32708

**New Principal Place of Business:**

1600 LITTLE SPARROW CT  
UNIT 1812  
WINTER SPRINGS, FL 32708

**Current Mailing Address:**

1600 LITTLE SPARROW CT  
WINTER SPRINGS, FL 32708

**New Mailing Address:**

**FEI Number:** 59-3686174

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ABLANEDO, CARLOS M  
1600 LITTLE SPARROW CT  
WINTER SPRINGS, FL 32708 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:** VP  
**Name:** PEREZ-VEGA, JULIO  
**Address:** 111 E WASHINGTON ST. UNIT 1812  
**City-St-Zip:** ORLANDO, FL 32801 UN

**Title:** S  
**Name:** LINGVAY, MAYRA  
**Address:** 337 BEACH AVE  
**City-St-Zip:** LONGWOOD, FL 32750

**Title:** T  
**Name:** MARTIN, ARNAUD  
**Address:** 114 HAMLINT LANE  
**City-St-Zip:** ALTAMONTE, FL 32714

**Title:** P  
**Name:** ABLANEDO, CARLOS  
**Address:** 1600 LITTLE SPARROW CT  
**City-St-Zip:** WINTER SPRINGS, FL 32708

I hereby 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 all other like empowered.

**SIGNATURE:** CARLOS M. ABLANEDO

PRES

02/08/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date