

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 NOV 10 AM 9:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N02000007331

1. Corporation Name

RENAISSANCE ACADEMY, INC.

Principal Place of Business

Mailing Address

~~3428 ELLINGTON WAY~~ 8431 Corporate Way
NEW PORT RICHEY FL 34655

~~3428 ELLINGTON WAY~~
NEW PORT RICHEY FL 34655

34653

34653



REINSTATEMENT

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

09/23/2002

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

65-1169989

Not Applicable

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
P D	CAFFREY, JANINE E	3428 ELLINGTON WAY	NEW PORT RICHEY FL 34655
T	LUSK, KATHLEEN	3421 TOWN AVE	NEW PORT RICHEY FL 34652
V	ERICKSON, LISA	7720 LEIGHTON CIR	NEW PORT RICHEY FL 34654
P	Andrasy, Theresa	5500 Gulf Trace Blvd.	Holiday, FL 34691
			100024573551
			11/10/03-01112-001 **61.25

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

CAFFREY, JANINE W
3428 ELLINGTON WAY
NEW PORT RICHEY FL 34655

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE
REGISTERED AGENT MUST SIGN

Date 10/15/03

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/15/03 727-858-2509

CR2ED040 (7/03)

Renaissance Academy

...where children perform

November 6, 2003

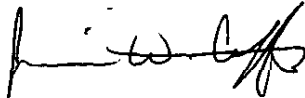
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Dear Department of State:

Enclosed please find documents required to reinstate Renaissance Academy, Inc. as a Florida non-profit corporation. I have included a check for \$61.25. Our corporation did not receive the two required UBR notices and is therefore not including the additional penalty.

Please contact me if I can provide additional information. Thank you for your assistance.

Sincerely,



Janine W. Caffrey, Ed.D.
Head of School