

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001954

FILED  
Apr 13, 2010  
Secretary of State

**Entity Name:** THE RESIDENCE AT RENAISSANCE SQUARE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1216 S. MISSOURI  
CLEARWATER, FL 33756

**New Principal Place of Business:**

**Current Mailing Address:**

4585 140TH AVE. N  
SUITE 1012  
CLEARWATER, FL 33762

**New Mailing Address:**

4585 140TH AVENUE N  
SUITE 1012  
CLEARWATER, FL 33762

**FEI Number:** 20-1098939

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COMMUNITY MANAGEMENT CONCEPTS, INC.  
4585 140TH AVE. NORTH  
SUITE 1012  
CLEARWATER, FL 33762 US

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

COMMUNITY MANAGEMENT CONCEPTS, INC.  
4585 140TH AVENUE N  
SUITE 1012  
CLEARWATER, FL 33762 US

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: KIRK BLISS

04/13/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: VELEZ-BOSCH, GUSTAVO  
Address: 1216 S MISSOURI AVENUE #111  
City-St-Zip: CLEARWATER, FL 33756

Title: T  
Name: RAFFERTY, JOHN  
Address: 1216 S MISSOURI AVENUE #207  
City-St-Zip: CLEARWATER, FL 33756

Title: VP  
Name: DITTIG, AMELIA  
Address: 1216 S MISSOURI AVENUE #318  
City-St-Zip: CLEARWATER, FL 33756

Title: S  
Name: FIORE, ANTHONY  
Address: 1216 S MISSOURI AVENUE #407  
City-St-Zip: CLEARWATER, FL 33756

Title: D  
Name: MARCIANTE, JOHN  
Address: 1216 S MISSOURI AVENUE #310  
City-St-Zip: CLEARWATER, FL 33756

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: NINA HUTCHINSON

MGR

04/13/2010

Electronic Signature of Signing Officer or Director

Date