

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002283

FILED
Feb 07, 2005
Secretary of State

Entity Name: RNT & ASSOCIATES DEVELOPMENT GROUP, INC.

Current Principal Place of Business:

15341 LAFITE LANE
CLERMONT, FL 34711

New Principal Place of Business:

1035 S. SEMORAN BOULEVARD
SUITE 1040
WINTER PARK, FL 32792

Current Mailing Address:

15341 LAFITE LANE
CLERMONT, FL 34711

New Mailing Address:

1035 S. SEMORAN BOULEVARD
SUITE 1040
WINTER PARK, FL 32792

FEI Number: 51-0449257

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROMAN-NAY-TORRES, GILDA
15341 LAFITE LANE
CLERMONT, FL 34711 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: CEO () Delete
Name: ROMAN-NAY-TORRES, GILDA
Address: 15341 LAFITE LANE
City-St-Zip: CLERMONT, FL 34711

Title: DR. (X) Delete
Name: MOGOWSKI, BRIAN MR.
Address: 206 PARK PLACE BLVD.
City-St-Zip: KISSIMMEE, FL 34741 US

Title: MS. () Delete
Name: CARIFI, MARILYN MS.
Address: 1935 WOODCREST DRIVE
City-St-Zip: WINTER PARK, FL 32792 US

Title: MR. () Delete
Name: MAISONET, SAMUEL
Address: 995 EAST MEMORIAL BOULEVARD, SUITE 110
City-St-Zip: LAKE LAND, FL 33801 US

Title: DR. () Delete
Name: CEDENO, RUBEN
Address: 1201 16TH STREET, N.W.
City-St-Zip: WASHINGTON, DC 20036 US

Title: MS. () Delete
Name: MUNROE, ALELIA MPH
Address: 1315 SOUTH ORANGE AVENUE, 2ND FLOOR
City-St-Zip: ORLANDO, FL 32806 US

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
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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 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 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: GILDA ROMAN-NAY-TORRES

CEO

02/07/2005

Electronic Signature of Signing Officer or Director

Date