2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2007
Secretary of State

DOCUMENT# N03000002283

Entity Name: RNT & ASSOCIATES DEVELOPMENT GROUP, INC.

Current Principal Place of Business:

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

New Principal Place of Business:

250 WILSHIRE BOULEVARD
SUITE 119
CASSELBERRY, FL 32707

Current Mailing Address:

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

New Mailing Address:

250 WILSHIRE BOULEVARD
SUITE 119
CASSELBERRY, FL 32707

FEI Number: 51-0449257 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROMAN-NAY-TORRES, GILDA
4828 NEW BROAD STREET
SUITE 245
OLANDO, FL 32814 US

Name and Address of New Registered Agent:

ROMAN-NAY-TORRES, GILDA
5125 PALM SPRINGS BOULEVARD
SUITE 15-101
TAMPA, FL 33647 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: _____ 03/17/2007
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	CEO	( ) Delete
Name:	ROMAN-NAY-TORRES, GILDA	
Address:	4828 NEW BROAD STREET	
City-St-Zip:	ORLANDO, FL 32814	
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:	LAKELAND, FL 33801 US	
Title:	DR.	( ) Delete
Name:	CEDENO, RUBEN	
Address:	1201 16TH STREET, N.W.	
City-St-Zip:	WASHINGTON, DC 20036 US	
Title:	MS.	(X) 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:	CEO	(X) Change ( ) Addition
Name:	ROMAN-NAY-TORRES, GILDA	
Address:	5125 PALM SPRINGS BOULEVARD	
City-St-Zip:	TAMPA, FL 33647 US	
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
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 Chapter 119, 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 03/17/2007
Electronic Signature of Signing Officer or Director — Date