

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004043

FILED  
Apr 07, 2011  
Secretary of State

**Entity Name:** RENAISSANCE PLACE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O NICHOLAS FERRARA  
115 RENAISSANCE PL  
NORTH PALM BEACH, FL 33408

**New Principal Place of Business:**

C/O R. SCOTT LASSWELL  
109 RENAISSANCE PL  
NORTH PALM BEACH, FL 33408

**Current Mailing Address:**

C/O AMD MANAGEMENT SERVICES LLC  
POB 1129  
JUPITER, FL 33468

**New Mailing Address:**

**FEI Number:** 92-0194220      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

LAW OFFICE-GARY FIELDS  
4400 PGA BLVD  
STE 900  
PALM BEACH GARDENS, FL 33410 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: SD  
Name: LORE, JUDY  
Address: 112 RENAISSANCE DRIVE  
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: PD  
Name: LASSWELL, R. SCOTT  
Address: 109 RENAISSANCE DRIVE  
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: TD  
Name: CURCIO, MICHAEL  
Address: 110 RENAISSANCE DRIVE  
City-St-Zip: NORTH PALM BEACH, FL 33408

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: R. SCOTT LASSWELL

PD

04/07/2011

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

\_\_\_\_\_  
Date