

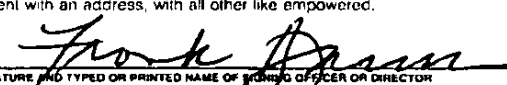


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 28, 2006 8:00 am
Secretary of State

02-10-2006 90019 047 ****61.25

DOCUMENT # N03000011076 1. Entity Name RENAISSANCE GROUP OF BONITA SPRINGS, INC.					
Principal Place of Business 26044 FAWNWOOD CT BONITA SPRINGS FL 34134			Mailing Address 26044 FAWNWOOD CT BONITA SPRINGS FL 34134		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 56-2926852 <div style="float: right;"> <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable </div>	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of Now Registered Agent		
KOZLOWSKI, FRANK 26591 ROOKERY LAKE DR. BONITA SPRINGS FL 34134			Name FRANK KOZLOWSKI Street Address (P.O. Box Number is Not Acceptable) 26044 FAWNWOOD CT City BONITA SPRINGS FL Zip Code 34134		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE  <small>Signature, typed or printed name of registered agent and his or her address</small>			DATE 1/24/06 <small>(NOTE: Registered Agent signatures required when reissuing)</small>		
FILE NOW: FEE IS \$61.25 Due By May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE P NAME CKOZLOWSKI, FRANK STREET ADDRESS 26044 FAWNWOOD CT CITY-ST-ZIP BONITA SPRINGS FL 34134	<input type="checkbox"/> Delete		TITLE DIRECTOR NAME ROBERT CULBERSON STREET ADDRESS 26160 Isle WAY CITY-ST-ZIP BONITA SPRINGS, FL 34134	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE VD NAME RUMMLER, WILLIAM STREET ADDRESS 26260 MIRA WAY CITY-ST-ZIP BONITA SPRINGS FL 34134	<input type="checkbox"/> Delete		TITLE DIRECTOR NAME BERNIE LONG STREET ADDRESS 26651 ROOKERY LAKE DR CITY-ST-ZIP BONITA SPRINGS, FL 34134	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE SD NAME PHILLIPS, LYMAN STREET ADDRESS 4801 ISLAND POND CT., #804 CITY-ST-ZIP BONITA SPRINGS FL 34134	<input type="checkbox"/> Delete		TITLE DIRECTOR NAME FRANCIS J MOOTZ STREET ADDRESS 26631 ROOKERY LAKE DR CITY-ST-ZIP BONITA SPRINGS, FL 34134	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE TD NAME BIRRELL, ROBERT STREET ADDRESS 26210 MIRA WAY CITY-ST-ZIP BONITA SPRINGS FL 34134	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE DIRECTOR NAME GILLETTE, ROBERT STREET ADDRESS 26210 MIRA WAY CITY-ST-ZIP BONITA SPRINGS FL 34134	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE DIRECTOR NAME POTTER, ROBERT STREET ADDRESS 26610 ROOKERY LAKE DR. CITY-ST-ZIP BONITA SPRINGS FL 34134	<input checked="" type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF FORMING OFFICER OR DIRECTOR</small>			DATE 1/24/06 DAYTIME PHONE # 239-992 5285		



ATTACHMENT

66003065

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 14, 2006

RENAISSANCE GROUP OF BONITA SPRINGS, INC.
26044 FAWNWOODCT
BONITA SPRINGS, FL 34134

Subject: RENAISSANCE GROUP OF BONITA SPRINGS, INC.

Reference Number: N03000011076

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$61.25; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Provide the title(s) of each officer/director listed on the report or on an attachment.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/rm

ANNUAL REPORTS SECTION