

# 2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

Amended

FILED

06 MAY -5 AM 11:47

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05/23/06--01049--022 \*\*70.00



05012006 Chg-NP CR2E037 (4/06)

<b>DOCUMENT # N03000011076</b> 1. Entity Name RENAISSANCE GROUP OF BONITA SPRINGS, INC.					
Principal Place of Business 26044 FAWNWOODCT BONITA SPRINGS, FL 34134			Mailing Address 26044 FAWNWOODCT BONITA SPRINGS, FL 34134		
2. Principal Place of Business 26631 ROOKERY LAKE DRIVE Suite, Apt. #, etc.		3. Mailing Address 26631 ROOKERY LAKE DRIVE Suite, Apt. #, etc.			
City & State BONITA SPRING FLORIDA Zip 34134 Country USA		City & State BONITA SPRINGS, FLORIDA Zip 34134 Country USA		4. FEI Number 56-2926852 Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent KOZLOWSKI, FRANK 26044 FAWN WOOD CT BONITA SPRINGS, FL 34134			7. Name and Address of New Registered Agent Name FRANCIS J. MOOTE JR Street Address (P.O. Box Number is Not Acceptable) 26331 ROOKERY LAKE DRIVE City BONITA SPRING 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 <u>Francis J. Moote Jr, President</u> DATE <u>May 2, 2006</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Amended AR is \$61.25		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 PD NAME CKOZLOWSKI, FRANK STREET ADDRESS 26044 FAWNWOOD CT CITY-ST-ZIP BONITA SPRINGS, FL 34134	<input checked="" type="checkbox"/> Delete		TITLE PD NAME FRANCIS J. MOOTE JR STREET ADDRESS 26631 ROOKERY LAKE DRIVE CITY-ST-ZIP BONITA SPRING, FLORIDA 34134	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE VPD NAME RUMMLER, WILLIAM STREET ADDRESS 26260 MIRA WAY CITY-ST-ZIP BONITA SPRINGS, FL 34134	<input type="checkbox"/> Delete		TITLE SD NAME BERNARD LONG STREET ADDRESS 26651 ROOKERY LAKE DRIVE CITY-ST-ZIP BONITA SPRINGS, FLORIDA 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 checked="" type="checkbox"/> Delete		TITLE D NAME ROSS ROBERTS STREET ADDRESS 26061 MANDEVILLA DRIVE CITY-ST-ZIP BONITA SPRING, FLORIDA 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		TITLE D NAME DENNIS NIKKIE STREET ADDRESS 26630 ROOKERY LAKE DRIVE CITY-ST-ZIP BONITA SPRING, FLORIDA 34134	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE D NAME GILLETTE, ROBERT STREET ADDRESS 26210 MIRA WAY CITY-ST-ZIP BONITA SPRINGS, FL 34134	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE D NAME CULBERSON, ROBERT STREET ADDRESS 26610 ROOKERY LAKE DR. CITY-ST-ZIP BONITA SPRINGS, FL 34134	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<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 Chapter 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: <u>Francis J. Moote Jr</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <u>May 2, 2006</u> Daytime Phone # <u>239-390-1553</u>		

FRANCIS J. MOOTE JR

B. Mitchell MAY 12 2006