

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000004036

FILED
Oct 18, 2009
Secretary of State

Entity Name: RENAISSANCE INSTITUTE ALUMNI ASSOCIATION, INC.

Current Principal Place of Business:

7000 N. FEDERAL HIGHWAY
2ND FLOOR
BOCA RATON, FL 33487 US

New Principal Place of Business:

7789 NW BEACON SQUARE BLVD
BOCA RATON, FL 33487 US

Current Mailing Address:

P.O. BOX 810334
BOCA RATON, FL 33487 US

New Mailing Address:

7789 NW BEACON SQUARE BLVD
BOCA RATON, FL 33487 US

FEI Number: 37-1482170 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HANSEN, DEREK C MR.
7000 N. FEDERAL HIGHWAY
2ND FLOOR
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

TRAKAS, BROOKS S MR.
7789 NW BEACON SQUARE BLVD
BOCA RATON, FL 33487 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: BROOKS TRAKAS

10/18/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRS () Delete
Name: HANSEN, DEREK C MR.
Address: 7000 N. FEDERAL HIGHWAY, 2ND FLOOR
City-St-Zip: BOCA RATON, FL 33487

Title: VP () Delete
Name: SCHWAM, ROBERT MR.
Address: 7000 N. FEDERAL HIGHWAY, 2ND FLOOR
City-St-Zip: BOCA RATON, FL 33487

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRS (X) Change () Addition
Name: TRAKAS, BROOKS S MR.
Address: 7789 NW BEACON SQUARE BLVD
City-St-Zip: BOCA RATON, FL 33487

Title: VP (X) Change () Addition
Name: NAESS, CHRISTOFFER MR.
Address: 7789 NW BEACON SQUARE BLVD
City-St-Zip: BOCA RATON, FL 33487

Title: TREA () Change (X) Addition
Name: BUSBY, KYLE
Address: 7789 NW BEACON SQUARE BLVD
City-St-Zip: BOCA RATON, FL 33487

I hereby certify that the information supplied with this filing does not qualify 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: BROOKS TRAKAS

PRS

10/18/2009

Electronic Signature of Signing Officer or Director

Date