

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012298

FILED  
Mar 18, 2009  
Secretary of State

Entity Name: RENAISSANCE VILLAS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

331 E. 124TH AVE.  
TAMPA, FL 33612

**New Principal Place of Business:**

**Current Mailing Address:**

C/O DLG ASSOCIATION SERVICES  
13911 N. DALE MABRY HWY SUITE 201A  
TAMPA, FL 33618

**New Mailing Address:**

FEI Number: 20-3941287      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

DLG ASSOCIATION SERVICES  
13911 N DALE MABRY HWY  
SUITE 201A  
TAMPA, FL 33618 US

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

DLG MANAGEMENT SERVICES  
13911 N DALE MABRY HWY  
SUITE 201A  
TAMPA, FL 33618 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: DLG MANAGEMENT SERVICES      03/18/2009  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ORTEGA, MACKENZIE  
Address: 303 OAK ROSE LANE, #102  
City-St-Zip: TAMPA, FL 33612

Title: T ( ) Delete  
Name: MARTINEZ, CRISTOBALL  
Address: 12406 ORANGE BLOSSOM OAK PL., #101  
City-St-Zip: TAMPA, FL 33612

Title: S ( ) Delete  
Name: ARROYO, SAREE  
Address: 815 OAK ROSE LANE, #102  
City-St-Zip: TAMPA, FL 33612

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: ORTEGA, DANIEL  
Address: 303 OAK ROSE LANE, #102  
City-St-Zip: TAMPA, FL 33612

Title: T (X) Change ( ) Addition  
Name: ALE, EFREN  
Address: 2665 SW 37TH AVE. #1207  
City-St-Zip: MIAMI, FL 33133

Title: S (X) Change ( ) Addition  
Name: MIRANDA, ROBERT  
Address: 1223 AVON WOOD CT  
City-St-Zip: TAMPA, FL 33559

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: DIANE LEE      MGR      03/18/2009  
Electronic Signature of Signing Officer or Director      Date