

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009581

FILED
May 13, 2008
Secretary of State

Entity Name: RENAISSANCE ACADEMY PARENTS' CLUB, INC.

Current Principal Place of Business:

8431 CORPORATE WAY
NEW PORT RICHEY, FL 34653

New Principal Place of Business:

Current Mailing Address:

8431 CORPORATE WAY
NEW PORT RICHEY, FL 34653

New Mailing Address:

FEI Number: 65-1169989 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

CAFFREY, JANINE W
8431 CORPORATE WAY
NEW PORT RICHEY, FL 34653 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: T () Delete
Name: CAFFREY, JANINE W
Address: 8431 CORPORATE WAY
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: T () Delete
Name: STUEBS, DEBORAH
Address: 198 CYPRESS TRACE
City-St-Zip: TARPON SPRINGS, FL 34688

Title: T () Delete
Name: DUGAN, LORI
Address: 10110 MIZNER ST
City-St-Zip: NEW PORT RICHEY, FL 34655

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: STUEBS, DEBRA
Address: 198 CYPRESS TRACE
City-St-Zip: TARPON SPRINGS, FL 34688

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DEBRA STUEBS

MRS.

05/13/2008

Electronic Signature of Signing Officer or Director

Date