

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000020209

FILED
Apr 26, 2004
Secretary of State

Entity Name: RENAISSANCE SCHOOLS INTERNATIONAL, INCORPORATED

Current Principal Place of Business:

P.O. BOX 13284
TALLAHASSEE, FL 32317

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 13284
TALLAHASSEE, FL 32317

New Mailing Address:

FEI Number: 59-3710595

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STREIT, SAMUEL M
1526 BELLEAU WOOD DRIVE
TALLAHASSEE, FL 32308

Name and Address of New Registered Agent:

STREIT, SAMUEL M
1526 BELLEAU WOODS DRIVE
TALLAHASSEE, FL 32308

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: SAMUEL M. STREIT

04/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: STREIT, SAMUEL M
Address: P.O. BOX 13284
City-St-Zip: TALLAHASSEE, FL 32317

Title: D () Delete
Name: CUSTIN, DAVID R
Address: 6401 SW 113 PL
City-St-Zip: MIAMI, FL 33173

Title: D () Delete
Name: RUBIN-STREIT, PHILIP M
Address: P.O. BOX 13284
City-St-Zip: TALLAHASSEE, FL 3231

Title: D () Delete
Name: FREEMAN, CONSTANCE E
Address: 3113 MOSSVALE LANE
City-St-Zip: TAMPA, FL 33618

Title: D () Delete
Name: PEYSER, RACHEL S
Address: 18 REBELLION ROAD
City-St-Zip: CHARLESTON, SC 29407

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAMUEL M. STREIT

P

04/26/2004

Electronic Signature of Signing Officer or Director

Date