

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000098636

Entity Name: RENAISSANCE VISION, INC.

FILED
Mar 16, 2009
Secretary of State

Current Principal Place of Business:

5488 PINE HILL ROAD
PORT RICHEY, FL 34668

New Principal Place of Business:

Current Mailing Address:

5488 PINE HILL ROAD
PORT RICHEY, FL 34668

New Mailing Address:

FEI Number: 26-0856678 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CAFFREY, JANINE W
5477 RED HAWK DRIVE
TRINITY, FL 34655 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: CAFFREY, JANINE
Address: 5477 RED HAWK DRIVE
City-St-Zip: TRINITY, FL 34655

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP () Change (X) Addition
Name: CAFFREY, DREW O
Address: 5477 RED HAWK DRIVE
City-St-Zip: TRINITY, FL 34655

Title: SECR () Change (X) Addition
Name: EKBLAD, CARL A
Address: 8350 CESSNA DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34654 51

Title: CEO () Change (X) Addition
Name: EKBLAD, LORRAINE K
Address: 8350 CESSNA DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34654 51

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LORRAINE K. EKBLAD

CEO

03/16/2009

Electronic Signature of Signing Officer or Director

Date