

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000003815

Entity Name: RENEGADES OF REAL ESTATE CLASSIC, INC.**Current Principal Place of Business:**5270 CHELAN COVE
LAKE WORTH, FL 33467**Current Mailing Address:**PO BOX 30503
FT LAUDERDALE, FL 33301 US**FEI Number:** 82-5214308**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LAW OFFICE OF KYLE FELTY, P.A.
725 N. HWY A1A, C112
JUPITER, FL 33477 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:** KYLE S. FELTY

03/09/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	VCH
Name	THOMSON, CHRISTOPHER
Address	20890 ENCANTO CT
City-State-Zip:	BOCA RATON FL 33433
Title	T
Name	DOHERTY, ROBERT
Address	518 N FEDERAL HWY UNIT 14
City-State-Zip:	LAKE WORTH BEACH FL 33460
Title	EBM
Name	PAULUS, DAN
Address	5270 CHELAN COVE
City-State-Zip:	LAKE WORTH FL 33467

Title	S
Name	FELTY, KYLE
Address	140 SE 92ND AVENUE
City-State-Zip:	OLD TOWN FL 32680
Title	EXECUTIVE BOARD MEMBER
Name	LEE, BLAIR
Address	4345 HAWTHORN AVE
City-State-Zip:	PALM BEACH GARDENS FL 33410
Title	CH
Name	DEPOTTER, BRIAN
Address	6301 NW 5TH WAY, SUITE 2800
City-State-Zip:	FT LAUDERDALE FL 33309

I hereby 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 all other like empowered.

SIGNATURE: BRIAN DEPOTTER

CH

03/09/2024

Electronic Signature of Signing Officer/Director Detail

Date