

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 06 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 670106 (4)

1. Corporation Name
RENU PROPERTIES, INC.



Principal Place of Business 1950 PALM CITY RD BUILD 8 APT 102 STUART FL 34994 US	Mailing Address 1950 PALM CITY ROAD BLDG. 8 APT. 102 STUART FL 34994-268 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 1357 N.E. OCEAN BLVD.	26 1357 N.E. OCEAN BLVD.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 APT. 214	27 APT. 214
City & State	City & State
23 STUART, Florida	28 STUART, Florida
Zip	Country
24 34996	25 MARTIN
Country	Zip
29 34996	30 MARTIN

3. Date Incorporated or Qualified 05/14/1980	
4. FEI Number 59-2004435	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent											
DRAKE, RONALD S. 1950 PALM CITY ROAD BLDG. 8 APT 102 STUART FL 34994		<table border="1"> <tr> <td>81 Name</td> <td></td> </tr> <tr> <td>82 Street Address (P.O. Box Number is Not Acceptable)</td> <td>1357 N.E. OCEAN BLVD.</td> </tr> <tr> <td>83</td> <td>APT 214</td> </tr> <tr> <td>84 City</td> <td>STUART FL</td> </tr> <tr> <td>85 Zip Code</td> <td>34996</td> </tr> </table>		81 Name		82 Street Address (P.O. Box Number is Not Acceptable)	1357 N.E. OCEAN BLVD.	83	APT 214	84 City	STUART FL	85 Zip Code	34996
81 Name													
82 Street Address (P.O. Box Number is Not Acceptable)	1357 N.E. OCEAN BLVD.												
83	APT 214												
84 City	STUART FL												
85 Zip Code	34996												

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DRAKE, RONALD S.	1.2 NAME	
STREET ADDRESS	1950 PALM CITY ROAD	1.3 STREET ADDRESS	1357 N.E. OCEAN BLVD. APT 214
CITY-ST-ZIP	STUART FL	1.4 CITY-ST-ZIP	STUART, FL 34996
TITLE	S <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DRAKE, RONALD S	2.2 NAME	
STREET ADDRESS	1950 PALM CITY RD 8102	2.3 STREET ADDRESS	1357 N.E. OCEAN BLVD, APT. 214
CITY-ST-ZIP	STUART FL	2.4 CITY-ST-ZIP	STUART, FL 34996
TITLE	T <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DRAKE, RONALD S.	3.2 NAME	
STREET ADDRESS	1950 PALM CITY ROAD	3.3 STREET ADDRESS	1357 N.E. OCEAN BLVD, APT 214
CITY-ST-ZIP	STUART FL	3.4 CITY-ST-ZIP	STUART, FL 34996
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Ronald S Drake* Date: *April 1 1998 (K61) 225-1830*

CR2E034 (10/97)