

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

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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

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

DO NOT WRITE IN THIS SPACE

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

2a. Mailing Address
26 1357 N.E. OCEAN BLVD.
Suite, Apt. #, etc.
27 APT. 214
City & State
28 STUART, Florida
Zip
29 34996
Country
30 MARTIN

3. Date Incorporated or Qualified
05/14/1980

4. FEI Number
59-2004435
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

DRAKE, RONALD S.
1950 PALM CITY ROAD
BLDG. 8 APT 102
STUART FL 34994

10. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
PD	DRAKE, RONALD S.	1950 PALM CITY ROAD	STUART FL	<input type="checkbox"/>
S	DRAKE, RONALD S	1950 PALM CITY RD 8102	STUART FL	<input type="checkbox"/>
T	DRAKE, RONALD S.	1950 PALM CITY ROAD	STUART FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	1.5 DELETE
<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		1357 N.E. OCEAN BLVD. APT 214	STUART, FL 34996	<input type="checkbox"/>
<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		1357 N.E. OCEAN BLVD. APT. 214	STUART, FL 34996	<input type="checkbox"/>
<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		1357 N.E. OCEAN BLVD. APT 214	STUART, FL 34996	<input type="checkbox"/>
<input type="checkbox"/> Change <input type="checkbox"/> Addition				<input type="checkbox"/>
<input type="checkbox"/> Change <input type="checkbox"/> Addition				<input type="checkbox"/>
<input type="checkbox"/> Change <input type="checkbox"/> Addition				<input type="checkbox"/>

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

April 1, 1998 (K61) 225-1830

CR2E034 (10/97)