

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F32018

Entity Name: RENWIL CORP.

FILED
May 01, 2008
Secretary of State

Current Principal Place of Business:

777 S. FLAGLER DR. E500
WEST PALM BEACH, FL 33401 US

New Principal Place of Business:

505 S. FLAGLER DRIVE, SUITE 900
WEST PALM BEACH, FL 33401 US

Current Mailing Address:

568 ISLAND DRIVE
PALM BEACH, FL 33480 US

New Mailing Address:

505 S. FLAGLER DRIVE, SUITE 900
WEST PALM BEACH, FL 33401 US

FEI Number: 59-2082031

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LICKLE, GARRISON
568 ISLAND DRIVE
PALM BEACH, FL 33480 US

Name and Address of New Registered Agent:

CALER, WILLIAM
505 S. FLAGLER DRIVE, SUITE 900
WEST PALM BEACH, FL 33411 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: WILLIAM CALER

05/01/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LICKLE, RENEE K
Address: 568 ISLAND DRIVE
City-St-Zip: PALM BEACH, FL 33480

Title: PTD () Delete
Name: LICKLE, WILLIAM
Address: 568 ISLAND DRIVE
City-St-Zip: PALM BEACH, FL 33480

Title: VP () Delete
Name: LICKLE, GARRISON
Address: 568 ISLAND DRIVE
City-St-Zip: PALM BEACH, FL 33480

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:

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: WILLIAM LICKLE

P

05/01/2008

Electronic Signature of Signing Officer or Director

Date