

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 03, 2007 08:00
Secretary of State

DOCUMENT # L02000022498

1. Entity Name

RENAISSANCE SQUARE NEWCO, LLC



Principal Place of Business

ATTN: HUGH L. CARAWAY, JR.
405 N. ST. MARY'S STREET, SUITE 850
SAN ANTONIO, TX 78205

Mailing Address

ATTN: HUGH L. CARAWAY, JR.
405 N. ST. MARY'S STREET, SUITE 850
SAN ANTONIO, TX 78205



02232007 No. Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

WARD, R. CARLTON
1253 PARK STREET
CLEARWATER, FL 33756

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	CARAWAY, HUGH L
STREET ADDRESS	405 N. ST. MARY'S ST. #850
CITY-ST-ZIP	SAN ANTONIO, TX 78205
TITLE	MGR
NAME	INTERNACIONAL REALTY, INC.
STREET ADDRESS	405 N. ST. MARY'S ST. #850
CITY-ST-ZIP	SAN ANTONIO, TX 78205
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/24/07-80065-009 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

Antonio Talamante *CONTROLLER*

3-1-07

210.281.1469