

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 10, 2007 8:00 am
Secretary of State

04-10-2007 90082 001 ****50.00

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1. Entity Name
REN-O-SCAPE, L.L.C.



Principal Place of Business
5850 63RD TERR. N.
PINELLAS PARK, FL 33781

Mailing Address
5850 63RD TERR. N.
PINELLAS PARK, FL 33781

60034650



DO NOT WRITE IN THIS SPACE

03272007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-0416345

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ALLEN, SHELLY J
5850 63RD TERR. N.
PINELLAS PARK, FL 33781

**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
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
ALLEN, SHELLY J.
5850 63RD TERR. N.
PINELLAS PARK, FL 33781

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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STREET ADDRESS
CITY - ST - ZIP

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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:

Shelly Allen

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

4/6/07

Date

Daytime Phone #