


# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

5/11/2007-90197-022-\$50.00-\$50.00

<b>DOCUMENT # L06000111185</b> 1. Entity Name <b>RENAISSANCE PARTNERS LLC</b>																																																																																				
Principal Place of Business <b>1440 N NOVA RD SUITE 305 HOLLY HILL, FL 32117 US</b>			Mailing Address <b>1440 N NOVA RD SUITE 305 HOLLY HILL, FL 32117 US</b>																																																																																	
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.  City & State  Zip      Country			3. Mailing Address  Suite, Apt. #, etc.  City & State  Zip      Country																																																																																	
4. FEI Number <div style="border: 1px solid black; padding: 2px; display: inline-block;">20-5941278</div>			Applied For <input type="checkbox"/> Not Applicable																																																																																	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required			04272007    Chg-LLC    CR2E083 (12/06)																																																																																	
6. Name and Address of Current Registered Agent  <b>WEBER, ALFRED R JR 1440 N NOVA RD STE 305 HOLLY HILL, FL 32117</b>				7. Name and Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  City <b>FL</b> Zip Code																																																																																
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 _____ (NOTE: Registered Agent signature required when re-registering)      DATE _____																																																																																				
<b>Filing Fee is \$50.00 Due by May 1, 2007</b>		<b>Make check payable to Florida Department of State</b>																																																																																		
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <b>9. MANAGING MEMBERS/MANAGERS</b> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">TITLE</th> <th style="width: 80%;">NAME</th> <th style="width: 10%; text-align: center;">Delete</th> </tr> </thead> <tbody> <tr> <td>MGRM</td> <td>WEBER, ALFRED R JR</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td></td> <td>1440 N NOVA RD STE 305</td> <td></td> </tr> <tr> <td></td> <td>HOLLY HILL, FL 32117</td> <td></td> </tr> <tr> <td>MGRM</td> <td>MARIN, JOHN</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td></td> <td>1440 N NOVA RD STE 305</td> <td></td> </tr> <tr> <td></td> <td>HOLLY HILL, FL 32117</td> <td></td> </tr> <tr> <td>MGRM</td> <td>WEBER, PATRICK</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td></td> <td>1440 N NOVA RD STE 305</td> <td></td> </tr> <tr> <td></td> <td>HOLLY HILL, FL 32117</td> <td></td> </tr> <tr> <td>MGRM</td> <td>ABF FUNDING LLC</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td></td> <td>1440 N NOVA RD STE 305</td> <td></td> </tr> <tr> <td></td> <td>HOLLY HILL, FL 32117</td> <td></td> </tr> <tr> <td>MGRM</td> <td>KIMBERLEY, BARBARA</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td></td> <td>1440 N NOVA RD STE 305</td> <td></td> </tr> <tr> <td></td> <td>HOLLY HILL, FL 32117</td> <td></td> </tr> <tr> <td></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table> </div> <div style="width: 48%;"> <b>10. ADDITIONS/CHANGES</b> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">TITLE</th> <th style="width: 80%;">NAME</th> <th style="width: 10%; text-align: center;">Change</th> <th style="width: 10%; text-align: center;">Addition</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td> </td><td> </td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> </tbody> </table> </div> </div>						TITLE	NAME	Delete	MGRM	WEBER, ALFRED R JR	<input type="checkbox"/>		1440 N NOVA RD STE 305			HOLLY HILL, FL 32117		MGRM	MARIN, JOHN	<input type="checkbox"/>		1440 N NOVA RD STE 305			HOLLY HILL, FL 32117		MGRM	WEBER, PATRICK	<input type="checkbox"/>		1440 N NOVA RD STE 305			HOLLY HILL, FL 32117		MGRM	ABF FUNDING LLC	<input type="checkbox"/>		1440 N NOVA RD STE 305			HOLLY HILL, FL 32117		MGRM	KIMBERLEY, BARBARA	<input type="checkbox"/>		1440 N NOVA RD STE 305			HOLLY HILL, FL 32117				<input type="checkbox"/>	TITLE	NAME	Change	Addition			<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
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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.																																																																																				
<b>SIGNATURE:</b> _____ <span style="float: right;">4/30/07    886-255-0889</span> <small>SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>																																																																																				