## 2008 FOR PROFIT CORPORATION

## ANNUAL REPORT



04-30-2008 90170 012 \*\*\*150.00 DOCUMENT # L23545 1. Entity Name RENAR DEVELOPMENT COMPANY Mailing Address Principal Place of Business 60032765 3731 NE PINEAPPLE AVE 3731 NE PINEAPPLE AVE SUITE C 200 SUITE C 200 JENSEN BEACH, FL 34957 JENSEN BEACH, FL 34957 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite Apt. #, etc. 03312008 CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 65-0181821 Not Applicable Zio Country Zin Country \$8.75 Additional 5. Certificate of Status Desired  $\Box$ Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DOSS, ARDEN JR Street Address (P.O. Box Number is Not Acceptable) 3731 NE PINNEAPPLE AVE SUITE C200 JENSEN BEACH, FL 34957 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature regiured when reinstating) 9. Election Campaign Financing \$5.00 May Be FiLE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE DP ☐ Delete TITLE Change ☐ Addition DOSS, ARDEN, JR. NAME 3731 NE PINEAPPLE AVE SUITE C200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JENSEN BEACH, FL 34957 CITY-ST-ZIP DCST ☐ Delete Change ☐ Addition TITLE DOSS, RENEE MOTTRAM NAME NAME 3731 NE PINEAPPLE AVE SUITE C200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JENSEN BEACH, FL 34957 CITY-ST-ZIP STV ☐ Delete TITLE ☐ Change ☐ Addition ROWE, RHONDAIS. NAME MAME 3731 NE PINEAPPLE AVE SUITE C200 STREET ACORESS STREET ADDRESS JENSEN BEACH, FL 34957 CITY-ST-ZIP CITY-ST-ZIP Change TITLE ☐ Addition Delete HILE MOTTRAM, JEFFREY S NAME NAME 2154 NORMANDY BLVD. 200 COLONIAL CENTER PKWY SUITE 130 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DELTONA FL 32725 CITY-ST-ZIP LAKE MARY, FL 32746 TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP City-St-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

STREET ADDRESS

CITY-ST-ZIP

TITLE

SIGNATURE:

TITLE

NAME

STREET ADDRESS

☐ Delete

☐ Change

Addition

**FILED** 

Apr 30, 2008 8:00 am Secretary of State