

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Feb 11 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L63063 (6)

1. Corporation Name
THE RIENDEAU CORPORATION

Principal Place of Business

763 WILLIAMS DITCH RD
CANTONMENT FL 32533

Mailing Address

763 WILLIAMS DITCH RD
CANTONMENT FL 32533-7368



2. Principal Place of Business

21 11521 Dueling Oaks Dr.
Suite, Apt. #, etc.

22 City & State
Pensacola FL

23 Zip
32514

24 Escambia

2a. Mailing Address

26 11521 Dueling Oaks Dr.
Suite, Apt. #, etc.

27 City & State
Pensacola FL

28 Zip
32514

29 Escambia

3. Date Incorporated or Qualified

03/30/1990

3a. Date of Last Report

06/14/1996

4. FEI Number

59-2999324

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

RIENDEAU, BRENDA LEA
763 WILLIAMS DITCH RD
CANTONMENT FL 32533

10. Name and Address of New Registered Agent

81 Name

Riendeau, Brenda Lea

82 Street Address (P.O. Box Number is Not Acceptable)

11521 Dueling Oaks Drive

83

84 City

Pensacola

FL

85 Zip Code

32514

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	RIENDEAU, BRENDA LEA	
STREET ADDRESS	763 WILLIAMS DITCH RD	
CITY - ST - ZIP	CANTONMENT FL	
TITLE	VST	<input type="checkbox"/> DELETE
NAME	RIENDEAU, RICHARD A.	
STREET ADDRESS	763 WILLIAMS DITCH RD	
CITY - ST - ZIP	CANTONMENT FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	RIENDEAU, RICHARD, A	
STREET ADDRESS	763 WILLIAMS DITCH RD	
CITY - ST - ZIP	CANTONMENT FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	11521 Dueling Oaks Drive
1.4 CITY - ST - ZIP	Pensacola, FL 32514
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	11521 Dueling Oaks Drive
2.4 CITY - ST - ZIP	Pensacola, FL 32514
3.1 TITLE	<input checked="" type="checkbox"/> Change
3.2 NAME	
3.3 STREET ADDRESS	11521 Dueling Oaks Drive
3.4 CITY - ST - ZIP	Pensacola, FL 32514
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Brenda Lea Riendeau 1-18-97 904-968-1865
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)