

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

FILED

Apr 29 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # L66444 1. Corporation Name: Renz Landscaping & Mower Repair Inc.					
Principal Place of Business 1413 Cambridge Dr Clearwater, FL 33756			Mailing Address		
2. Principal Place of Business 21 1640 N. Hercules Suite, Apt. #, etc. Suite A City & State Clearwater Zip 33765 County Pinellas		2a. Mailing Address 26 Clearwater Suite, Apt. #, etc. SAME City & State SAME Zip 33765 Country FL		4. FFI Number 59-3017346 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 owes or has paid the current year Intangible Personal Property Tax due June 30 ☒ Yes ☐ No	
9. Name and Address of Current Registered Agent Gene M. Renz 1413 Cambridge Dr Clearwater FL 33756			10. Name and Address of New Registered Agent 81 Name Gene M. Renz 82 Street Address (P.O. Box Number is Not Acceptable) 1413 Cambridge Dr 83 City Clearwater FL 85 Zip Code 33756		
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 Gene M. Renz DATE 4/22/98					
12. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS CITY-ST-ZIP 1. President Gene M. Renz 1413 Cambridge Dr Clearwater FL 33756 2. Treasurer SAME AS ABOVE 3. Vice President Scott A. Renz 1230 Evergreen Ave SE Clearwater FL 33756 4. Secretary SAME AS ABOVE			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE ☐ Change ☐ Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE ☐ Change ☐ Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE ☐ Change ☐ Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE ☐ Change ☐ Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE ☐ Change ☐ Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE ☐ Change ☐ Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		
14. I 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: Gene M. Renz DATE: 4/22/98 DAYTIME PHONE: 813 447-6573					

CR2E034 (10/97)