2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27151

FILED May 09, 2008 Secretary of State

Entity Nai	me: THE RENEGADE CONDOMINIUMS ASSOCIAT	TION, INC.
Current P	rincipal Place of Business:	New Principal Place of Business:
431 WAVE	AGEMENT ERLY RD SSEE, FL 32312 US	KRM MANAGEMENT 528 E. PARK AVE. TALLAHASSEE, FL 32301 US
Current M	lailing Address:	New Mailing Address:
431 WAVE	AGEMENT ERLY RD SSEE, FL 32312 US	KRM MANAGEMENT 528 E. PARK AVE. TALLAHASSEE, FL 32301 US
	: 59-3604102 FEI Number Applied For() FEI Nuce with s. 607.193(2)(b), F.S., the corporation did not receive	Imber Not Applicable () Certificate of Status Desired () the prior notice.
Name and	Address of Current Registered Agent:	Name and Address of New Registered Agent:
	ERLY ROAD	
TALLATIA	SSEE, FL 32312 US	
The above	,	of changing its registered office or registered agent, or both,
The above	named entity submits this statement for the purpose e of Florida.	of changing its registered office or registered agent, or both,
The above	named entity submits this statement for the purpose e of Florida.	of changing its registered office or registered agent, or both, Date
The above in the State SIGNATUR	named entity submits this statement for the purpose e of Florida.	
The above in the State SIGNATUR	e named entity submits this statement for the purpose e of Florida. RE: Electronic Signature of Registered Agent	Date
The above in the State SIGNATUR OFFICER: Title: Name: Address:	e named entity submits this statement for the purpose e of Florida. RE: Electronic Signature of Registered Agent S AND DIRECTORS: DSVP () Delete OOTEN, HOMER 6700 TREASURE OAKS CIR	Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS Title: () Change () Addition Name: Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHELLE FRENCH DP 05/09/2008