

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000120862

Entity Name: RENAISSANCE GP, INC.

FILED
Apr 21, 2006
Secretary of State

Current Principal Place of Business:

430 SOUTH HARTSELL AVENUE
LAKELAND, FL 33815

New Principal Place of Business:

Current Mailing Address:

430 SOUTH HARTSELL AVENUE
LAKELAND, FL 33815

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAXON, BERNICE S
SAXON, GILMORE, CARRAWAY, GIBBONS, ET AL
201 E. KENNEDY BLVD., SUITE 600
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: HERNANDEZ, HERBERT MR.
Address: 430 SOUTH HARTSELL AVENUE
City-St-Zip: LAKELAND, FL 33815

Title: DIR. () Delete
Name: CROSBY, SAMUEL G ESQUIRE
Address: 430 SOUTH HARTSELL AVENUE
City-St-Zip: LAKELAND, FL 33815

Title: DIR. () Delete
Name: PARRY, WILLIAM MR.
Address: 430 SOUTH HARTSELL AVENUE
City-St-Zip: LAKELAND, FL 33815

Title: DIR. () Delete
Name: SMITH, GARY MR.
Address: 430 SOUTH HARTSELL AVENUE
City-St-Zip: LAKELAND, FL 33815

Title: DIR. () Delete
Name: JOHNSON, DARYL MR.
Address: 430 SOUTH HARTSELL AVENUE
City-St-Zip: LAKELAND, FL 33815

Title: DIR. () Delete
Name: OLDHAM, CARRIE MRS.
Address: 430 SOUTH HARTSELL AVENUE
City-St-Zip: LAKELAND, FL 33815

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HERBERT HERNANDEZ

PRES

04/21/2006

Electronic Signature of Signing Officer or Director

Date