2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000114176

Entity Name: RENEGADE TESTING & INSPECTION, INC.

FILED Jan 22, 2007 Secretary of State

Current Principal Place of Business: New	Principal Place of Business:
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4854 SOUTH SEMORAN BLVD 372 WEST GRANT STREET #2206 ORLANDO, FL 32806

ORLANDO, FL 32822

Current Mailing Address: New Mailing Address:

4854 SOUTH SEMORAN BLVD P.O. BOX 568931 #2206 ORLANDO, FL 32822 P.O. BOX 568931 ORLANDO, FL 32826

FEI Number: 20-5596428 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SMITH, CHELSEY
4854 SOUTH SEMORAN BLVD
4206
ORLANDO, FL 32822 US
SMITH, CHELSEY
372 WEST GRANT STREET
ORLANDO, FL 32806 US

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: CHELSEY SMITH 01/22/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 SMITH, CHELSEY
 Name:
 SMITH, CHELSEY

 Address:
 4854 SOUTH SEMORAN BLVD #2206
 Address:
 P.O. BOX 568931

 City-St-Zip:
 ORLANDO, FL 32822
 City-St-Zip:
 ORLANDO, FL 32856

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 SMITH, JOSHUA L
 Name:
 SMITH, JOSHUA L

 Address:
 4854 SOUTH SEMORAN BLVD #2206
 Address:
 P.O. BOX 568931

 City-St-Zip:
 ORLANDO, FL 32822
 City-St-Zip:
 ORLANDO, FL 32856

Title: S () Delete Title: () Change () Addition

 Name:
 STRINGER, RICHARD K
 Name:

 Address:
 337 DENTON AVENUE
 Address:

 City-St-Zip:
 AUBURNDALE, FL 33823
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 STRINGER, JAMES K
 Name:

 Address:
 775 SPICEWOOD DR.
 Address:

 City-St-Zip:
 LAKELAND, FL 33801
 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: CHELSEY SMITH P 01/22/2007