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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P26086

(9)

RENTALAND, INC.

District Description	Mailing Address						
Principal Prace of Business	•	Mailing Address					
P.O. BOX 5261 LAKE WYLIE SC 29710	P.O. BOX 5261 LAKE WYLIE SC 29710-500	1					
				3. Date Incorporated or Qualifie 09/19/1989		of Last Re 5/1996	port
2. Principal Place of Business	2a. Mailing Address			4. FEI Number		Apı	olied For
21 P.O. BOX 550830	26 P.O. BOX 5	550830		56-1441095	<del></del>		Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	27		5. Certificate of Status Desired		<b>\$8.75</b> A Fee Re	
City & State	City & State	City & State		6. Election Campaign Financing		\$5.00	May Be
23 JACKSONVILLE, F	L 28 JACKSONVII	VILLE, FL		Trust Fund Contribution		Added to	Fees
Zip Country 24 32255 25 DUVA	Zip	Country 30 DUV		8. This corporation has fiability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			
9. Name and Addres	s of Current Registered Agent			10. Name and Address of New	Registered A	gent	
CT CORPORATION SYSTE		81	Name				
1200 S. PINE ISLAND ROAD			Street Add	ress (P.O. Box Number is Not Accep	table)		
PLANTATION FL 33324							
		83					
		84	City			85 Zip C	ode
					<u>FL</u>	<u> </u>	
office or registered agent, or both	ons 607.0502 and 607.1508, Florida Statute in the State of Florida. Such change was a pt the obligations of Section 607.0505, Flo	uthorized by	the corporal	poration submits this statement for the tion's board of directors. I hereby ac	e purpose of c cept the appo	changing its intment as i	registered registered
SIGNATURE							
Stgrature, typed or pontru name o			nt signature requi	red when reinstating)	DATE		
	FICERS AND DIRECTORS	13.	<del>,</del>	ADDITIONS/CHANGES TO OF		Change	S IN 12 Addition
TILLE PD	L_J DELETE	1.1 ₹ITL€		PD	_	C) Grange	L Addrion
GUINEY, RICHARD J		1.2 NAME		GUINEY, RICHARD			
STREET ADDRESS 2204-F YAGER CRE	EV PUIAE	1.3 STREET		425 TIMBERWALK C			
CHTY+S1+ZIP CHARLOTTE NC	DELETE	1.4 CITY - 8		PONTE VEDRA BEAC	H, FL	32082 Change	Addition
CHARLEST ASSESS IF A		21 TITLE		SD	_	Cuante	L. HOUSILON
AAA E VAAED ODE		2 2 NAME		GUINEY, MARY JEA		^•	
OLLAN OTTE NO	EN DNIVE	23 STREET		425 TIMBERWALK C		21	Į
Oliver Co. Co.	DELETE	2 4 CITY- 3 1 TITLE	51-ZIP	JACKSONVILLE, FL	_32082	Change	Addition
THE NAME	_ butte	32 NAME			•	- CHANGE	
		3.3 STREE	ADOBECC				
STREET ADDRESS		3.3 SINCE 3.4. CITY-					
CHY+ST-ZIP THUE	DELETE	4.1 TITLE	J1 - 4H			Change	Addition
NAME		4. 2 NAME			•	• • • •	
STREET ADDIGESS		4.3 STREE	ADORESS				
CITY-ST-ZIP		4.4 City-					.
TITLE	DELETE	5.1 TITLE	-			Change	Addition
NAME.	<del></del>	5.2 NAME				-	
STREET ADDRESS			ADDRESS				
CITY-ST-WP		5.4 CITY-					
THE	☐ DETELE	6.1 TITLE				Change	Addition
NAME.	<del>_</del>	6.2 NAME					1
STREET ADORESS			ADDRESS				
CITY-ST-ZIP		6.4 CITY -:					

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.

Daytinie Phone #

**FILED** 

Feb 12 1997 8:00am

Secretary of State