FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

	1996	The state of the s	DIVISION OF CORPORATIONS					
DOCUI 1. Corporation	MENT #	P39348	(8)					
REN/	AISSANCE MARKE	TING. INC.						
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D	10							
Principal Place of Business Mailing Address						1 (49)/100 100 11110 (2102 11111 011	141 (111 a1611 f1611 h1611 A	(8)1 61811 S1811 (88)
			P. O. BOX 2546	0.0				
US			BONITA SPGS FL 33959 US					
						3. Date incorporated or Qualified	3a. Date of Last F	
2. Principal Pla	ace of Business	2a.	Mailing Address			06/23/1992 4. FEI Number	06/30/	Applied For
21		26				38-2368735	<u>}</u>	Not Applicable
Suite, Apt. #	⊭, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.79	5 Additional
22		27				V. Certificate of Status Desired		Required
City & State	1	28	City & State			6. Election Campaign Financing		00 May Be
Zip	Country		Žip	Country		Trust Fund Contribution 8. This corporation has liability for it	Adde	od to Fees
24	25	29	,p	30		Florida Statutes Yes		199.032,
	9. Name and Addre	ss of Current Registe	ered Agent			10. Name and Address of New Ro	egistered Agent	
				81	Name			
PREWITT, RICHARD A.					Street Addre	ess (P.O. Box Number is Not Acceptable	e)	
	BELLE RIO DR.			83				
DUNII	A SPGS. FL 33923			63				
				84	City		FL 85 Zi	ip Code
11. Pursuant to	o the provisions of Section	ons 607.0502 and 607.	1508, Florida Statutes	s, the above-r	l named corpora	ation submits this statement for the purp	and of abancing its	registered office
Or registere	ed agent, or both, in the a h, and accept the obligat	State di Fiorida, Such i	criande was authorizei	d by the corp	oration's board	d of directors. I hereby accept the appo	intment as registered	dagent. Lam
SIGNATURE _								
12.	Signature, typed or printed name of	If registered agent and title if ap FFICERS AND DIRECT		E: Registered Ager	it signature required		DATE CONTRACTOR	300.01.10
TITLE	P	THOSHO AND DINEO	DELETE	1. 1 TITLE		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTO	DRS IN 12 Addition
NAME	PREWITT, RICHA	ARD ALAN		1.2 NAME				
STREET ADDRESS	27075 BELLE RI			1.3 STREET	ADDRESS			
CITY-ST-ZIP	BONITA SPGS F	L		1.4 CiTY - S	T-ZIP			
TITLE	VST		☐ DELETE	2. 1 TITLE	İ		Change	☐ Addition
NAME	PREWITT, JUDIT			2.2 NAME				
STREET ADDRESS CITY-ST-ZIP	27075 BELLE RI- BONITA SPGS F			2.3 STREET				
TITLE	DOMIN SEGS F	<u> </u>	DELETE	24 CITY-S 3 1 TITLE	1-ZIP		Change	Addition
NAME				32 NAME			Change	[] Abbillon
STREET ADDRESS				3.3. STREET	ADDRESS			
CITY-ST-ZIP	-			3.4 CITY-S	T-ZIP			
THILE			DELETE	4. 1 TITLE			Change	Addition
NAME				4.2 NAME	ļ			
STREET ADDRESS				4.3 STREET				
CITY-ST-ZIP TITLE			DELETE	4.4 CITY-S 5. 1 TITLE	T-ZIP		[7] Chan-a	Addition
NAME			C pertit	5. 1 TITLE 5.2 NAME			Change	Addition
STREET ADDRESS				5.3 STREET	ADDRESS			
CITY - ST - ZIP				5.4 CITY-S				
TITLE			☐ DELETE	6 1 TITLE			Change	Addition
NAME				62 NAME				
STREET ADDRESS				63 STREFT	ADDRESS			
CITY OF ZID								

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 order attachment with an address.

SIGNATURE:

TUDITH K. PREWITT 4/23/96 941-495-6033

CR2E034 (12/95)