Mar 01, 1999 8:00 am Secretary of State

FILED

03-01-1999 90169 006 ***158.75

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P93000043244

RENNER & BURGESS, INC.

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Principal Place of Business			Mailing Address					-
1 S.E. 4TH AVENUE. SUITE 205 DELRAY BEACH FL 33483 US US US			205				DO NOT WRITE IN THIS SPACE	
US US							!	3. Date incorporated or Qualifed
								06/17/1993
2. Principal Place of Business 2a. Mailing Add				SS				4. FEI Number Applied For
21			26					65-0417614 Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State			City & State			-		6. Election Campaign Financing \$5.00 May Be
23		28						Trust Fund Contribution Added to Fees
Zip	Country		Zip	Cou	ntry			8. This corporation owes the current year Intangible
24	25	29		30				Personal Property Tax.
	9. Name and Address of Current	Regis	tered Agent			1		10. Name and Address of New Registered Agent
DEN	UFO TEDI				81	Name		
RENNER, TERI					82	Street	Addres	ess (P.O. Box Number is Not Acceptable)
1 SE FOURTH AVENUE SUITE 205								· · · · · · · · · · · · · · · · · · ·
DELRAY BEACH FL 33483			83					
					84	City		FL 85 Zip Code
office or re agent. I ar SIGNATURE	egistered agent, or both, in the State on the state of the including a state of the obligation and accept the obligation in the state of the obligation and the state of the obligation and the state of the obligation and the obligation are stated as the obligation and the obligation are stated as the oblig	of Florid ions of,	la. Such change was at Section 607.0505, Flor	uthorized rida Stati	i by ites	the corpo	oration	oration submits this statement for the purpose of changing its registered n's board of directors. I hereby accept the appointment as registered
	Signature, typed or printed name of registered agent			<u> </u>	Agen	nt signature r	equired v	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	OFFICERS AND	JUINE	☐ DELETÉ	13. 1.1 TII			~	
TITLE	RENNER, TERESA			1.2 NA			DI	TERESA
NAME						ADDRESS	Kt	ENNER, TERESA > WESTOVER RD KANSAS CITY MO, C4113
STREET ADDRESS	DELRAY BEACH FL 33483				1.4 CITY-ST-ZIP		210	WESTOVEK KD NAMA CA 113
CITY-ST-ZIP TITLE	DELIVAT DEACTITE 33403			2.1 10		1-21-	DV	Change ☐ Addition
NAME	'		2.2 NA	MF		a	URGESS HARRY	
STREET ADDRESS						TADDRESS	73	URGESS: HARRY LOZ NE 15 th COURT
CITY-ST-ZIP				2.4 C	TY-S	ST-ZIP	JE	NSEN BEACH FL. 34957
TITLE			3.1 TIT				☐ Change ☐ Addition	
NAME }	WILLIAMS, ELAINE			3.2 NA	ME]	
STREET ADDRESS	153 S.E. 26TH AVENUE			3.3 ST	REET	TADDRESS		
CITY-ST-ZIP	BOYNTON BEACH FL 33435			3.4. CI	TY-S	ST-ZIP		<u> </u>
TITLE			☐ DELETE	4.1 TII	ſLΕ			☐ Change ☐ Addition
NAME				4. 2 N	AME		ŀ	
STREET ADDRESS				4.3 ST	REE	T ADDRESS		
CITY-ST-ZIP				4.4 CI		T-ZIP		
TITLE			☐ DELETE	5.1 TI				Change Addition
NAME				5.2 N				
STREET ADDRESS						T ADDRESS	l	
CITY-ST-ZIP				5.4 CI	TY-S	T-ZIP	1	

14. I 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 conforation 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, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

DELETE

☐ Change

☐ Addition