

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

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FLORIDA

ANNUAL REPORT
1995



DEPARTMENT OF STATE
OFFICE OF CORPORATIONS
TALLAHASSEE, FLORIDA 32399-0001

DOCUMENT # **P93000057364 (0)**

RENTZ MOVING, INC.

1. Mailing Address		2a. Mailing Address		3. Date incorporated or created		3a. Date of last report	
1613 LAKE DRIVE DELAND FL 32724		1613 LAKE DRIVE DELAND FL 32724		08/09/1993		05/01/1994	
2. Principal Office Address		2b. Principal Office Address		4. Filing Number		Applying For	
21		26		59-3194490		Not Applicable	
22		27		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
24		25		29		30	
25		26		27		28	
29		30		31		32	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
RENTZ, CHRISTOPHER R 1613 LAKE DRIVE DELAND FL 32724				81 Name			
				82 Street Address (P.O. Box Number is not acceptable)			
				83			
				84 City			
				FL 85 Zip Code			

11. Pursuant to the provisions of Sections 801.05(2) and 801.15(8), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent in accordance with and accept the obligations of Section 801.05(2), Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
1. NAME	PST RENTZ, CHRISTOPHER R 1613 LAKE DRIVE DELAND FL 32724	1. NAME	[] Change [] Addition
2. NAME		2. NAME	[] Change [] Addition
3. NAME		3. NAME	[] Change [] Addition
4. NAME		4. NAME	[] Change [] Addition
5. NAME		5. NAME	[] Change [] Addition
6. NAME		6. NAME	[] Change [] Addition
7. NAME		7. NAME	[] Change [] Addition
8. NAME		8. NAME	[] Change [] Addition
9. NAME		9. NAME	[] Change [] Addition
10. NAME		10. NAME	[] Change [] Addition
11. NAME		11. NAME	[] Change [] Addition
12. NAME		12. NAME	[] Change [] Addition
13. NAME		13. NAME	[] Change [] Addition
14. NAME		14. NAME	[] Change [] Addition
15. NAME		15. NAME	[] Change [] Addition
16. NAME		16. NAME	[] Change [] Addition
17. NAME		17. NAME	[] Change [] Addition
18. NAME		18. NAME	[] Change [] Addition
19. NAME		19. NAME	[] Change [] Addition
20. NAME		20. NAME	[] Change [] Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and shows and qualifies for the requirements stated in Sections 801.05(2) and 801.15(8), Florida Statutes. I further certify that the information included 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 make this report as required by paragraph (c) of Section 801.05, Florida Statutes, and that my name appears in Block 1 of this report. If changed, on an attachment with my address.

SIGNATURE: *Chris Rentz* 5-9-95 904-738-5747