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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P95000009326 (6)

RENAISSANCE HOMES OF PINELLAS, INC.

## **FILED** May 01 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						4 saarraffe ein joint artes alleit dûtte gan	1) <b>951)) 95)) 6 (9) 93</b> ))))	#    <b>              </b>	
877 EXEC CENTER DRIVE WEST SUITE 303 877 EXEC CENTER DRIVE WES ST PETERSBURG FL 33702 ST PETERSBURG FL 33702				UITE 303					
						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified 02/03/1995			
2. Principal Place of Business 2a. Mailing Address						4, FEI Number	<u> _</u> '	Applied For	
21 13 663 - 65 th STREET N 26						65-0554489		Not Applicable	
Suite, Apt.		Suite, Apt. #, etc.				5. Certificate of Status Desired	ree Haquireo		
City & State	60, FL.	City & State				Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees		
Ζίρ	Country	Zip	Соц	ntry		8. This corporation owes or has pai	d the current year	Intangible	
24 <i>337</i> -		29	30			Personal Property Tax due June		□ No	
<u></u>	g. Name and Address of Current	Registered Agent				10. Name and Address of New Reg	jistered Agent		
MA	SCARA, ERNEST L			81 Nar	ne				
877 EXEC CENTER DRIVE WEST SUITE 303 ST PETERSBURG FL 33702					82 Street Address (P.O. Box Number is Not Acceptable)				
					63				
				84 City			FL 85 Z	Zip Code	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statut	tes, the at	<u> </u>	ed corp	poration submits this statement for the pr	rpose of changin	g 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. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.									
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE									
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFIC			
TITLE	DP	DELETE	1.1 T(T	LĒ	<b>Ъ</b> -Р	RESIDENT/TREADUR	PER ☐ Chang	ge Addition	
NAME	HOVE, STEPHEN D		12 NA	ME	5	HON A. AGER		13	
STREET ADDRESS	101 PHILIPPE PKWY # 305		1.3 ST	EET ADDRE		1663 - 65 H. STREET	r μ.	[	
CITY-ST-ZIP	SAFETY HARBOR FL 34695	T OF SEE		Y-ST-ZIP	1	ARGO, FL 33771		}	
TITLE		☐ DELETE	2.1 TIT		>- <u>V</u> .	P. / SECRETARY SEPH P. TRAYNHAM	☐ Chang	ge 🔀 Addition	
NAME			2.2 NA				. I		
STREET ADDRESS				REET ADDRE		663-65th STREET 1	J .		
CITY-ST-ZIP TITLE		☐ DELETE		TY-ST-ZIP		np60, FL. 33771	Chang	ge X Addition	
1		ptctit	3.1 T(I		)- V.			Je PAL MOUITOIT	
NAME CANCEL ADDRESS			3.2 NA		~   1 3	eter Mason 1663-65th Street	ν.		
STREET ADDRESS				REET ADDRE		ARGO, FL. 33771	,		
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NAME			4.2 N/					,,,	
STREET ADDRESS			1	REET ADDRE	25				
CITY-ST-ZIP				Y-ST-ZIP					
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NAME		—	5.2 NA					, <del></del>	
STREET ADDRESS				ree1 addre	is l				
CITY-ST-ZIP				Y-ST-ZIP	1			}	
TITLE		☐ DELETE	6.1 TIT				☐ Chang	ge Addition	
NAME			6.2 NA						
STREET ADDRESS				HEET ADDRE	ss				
CITY-ST-ZIP				Y-ST-ZIP	1			}	
	ertify that the information supplied with	this filing does not qualify for			ated in	Section 119.07(3)(i), Florida Statutes. I f	urther certify that	the information	

Indicated on this annual report or supplemental annual report is true and accurate and that my officer or director of the corporation or the receiver or trustee empowered to execute this report Block 12 or Block 13 if changed, or on an attachment with an address.

4/32/90 (Q17) 52C FO