## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000009736

Entity Name: THE RENOVATORS' OF JACKSONVILLE, INC.

FILED Apr 29, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8834-4 GOODBY'S EXECUTIVE DRIVE 5150 BELFORT ROAD, BLDG 100 JACKSONVILLE, FL 32217 JACKSONVILLE, FL 32256

Current Mailing Address: New Mailing Address:

8834-4 GOODBY'S EXECUTIVE DRIVE P.O. BOX 551260

JACKSONVILLE, FL 32217 JACKSONVILLE, FL 32255

FEI Number: 59-3424558 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PERETZMAN, STEVEN SCHNEIDER, MICHAEL N 8834-4 GOODBY'S EXECUTIVE DRIVE P.O. BOX 551260

JACKSONVILLE, FL 32217 US JACKSONVILLE, FL 32255 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MICHAEL N SCHNEIDER 04/29/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition

Name:PERETZMAN, STEVENName:PERETZMAN, STEVENAddress:8834-4 GOODBY'S EXECUTIVE DRIVEAddress:5150 BELFORT ROAD, BLDG 100

City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip: JACKSONVILLE, FL 32256

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 PERETZMAN, WILLIAM
 Name:

 Address:
 8834-4 GOODBY'S EXECUTIVE DRIVE
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32217
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVE PERETZMAN PD 04/29/2005