

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000019064

1. Entity Name

RENAISSANCE MORTGAGE GROUP, INC.

FILED
May 22, 2000 8:00 am
Secretary of State

05-22-2000 90035 018 ***150.00

Principal Place of Business

Mailing Address

~~1800 WEST HIBISCUS #124~~
~~MELBOURNE FL 32901~~

~~1800 WEST HIBISCUS #124~~
~~MELBOURNE FL 32901-2624~~

2. Principal Place of Business

3. Mailing Address

400 E. MERRITT AVENUE
 Suite, Apt. #, etc.
 SUITE F

400 E. MERRITT AVE
 Suite, Apt. #, etc.
 SUITE F

City & State
 MERRITT ISLAND, FL

City & State
 MERRITT ISLAND, FL

Zip
 32953

Country
 USA

Zip
 32953

Country
 USA



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3420269

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CROUCH, SHAWN D
~~1800 WEST HIBISCUS #124~~
~~MELBOURNE FL 32901~~

Name

Street Address (P.O. Box Number is Not Acceptable)

400 E. MERRITT AVENUE
 SUITE F

City

MERRITT ISLAND

FL

Zip Code

32953

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Shawn D Crouch

SHAWN D CROUCH

5/1/00

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PT
 NAME CROUCH, SHAWN D
 STREET ADDRESS 1130 REBECCA DRIVE
 CITY-ST-ZIP MERRITT ISLAND FL 32952 ☐ Delete

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE VPS
 NAME TAYLOR, ROBERT H JR
 STREET ADDRESS 8595 SYLVAN DRIVE
 CITY-ST-ZIP WEST MELBOURNE FL 32904 ☒ Delete

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Shawn D Crouch President

5/1/00

321-459-9940

CR2E034 (9/99)