

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-30-2008 90170 007 ***150.00

DOCUMENT # P97000097221

1. Entity Name
RENAR/JBCC, INC.



Principal Place of Business
**3731 NE PINEAPPLE AVE
C200
JENSEN BEACH, FL 34957**

Mailing Address
**3731 NE PINEAPPLE AVE
C200
JENSEN BEACH, FL 34957**

60032770



03312008 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc

Suite, Apt. #, etc

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3480871

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**FOX, M. LANNING
3473 SE WILLOUGHBY BLVD
STUART, FL 34994**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when re-issuing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
DOSS, ARDEN JR
3731 NE PINEAPPLE AVE - STE C200
JENSEN BEACH, FL 34957** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CSTD
DOSS, RENEE MOTTRAM
3731 NE PINEAPPLE AVE - STE C200
JENSEN BEACH, FL 34957** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VST
ROWE, RHONDA S
3731 NE PINEAPPLE AVE - STE C200
JENSEN BEACH, FL 34957** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
MOTTRAM, JEFFREY S
200 COLONIAL CENTER PARKWAY STE 130
LAKE MARY, FL 32746** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition
**2154 NORMANDY BLVD.
DELTONA FL 32725**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 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

4/11/08

Date

772-692-7800

Daytime Phone #