

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Morhart
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000099537 (7)

1. Corporation Name
RENAISSANCE MILLWORKS, INC.

Principal Place of Business

Mailing Address

700 E. UNION ST., #3J
JACKSONVILLE FL 32205

700 E. UNION ST., #3J
JACKSONVILLE FL 32205



SCC 11-19-98

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/19/1997

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 P.O. Box 161908

2a. Mailing Address

Suite, Apt. #, etc.

22 Attn. Jim Hillencamp

Suite, Apt. #, etc.

27 City & State

SAME

23 Miami, Florida

28 City & State

Zip

24 33116

Country

Zip

29

Country

30

9. Name and Address of Current Registered Agent

GENK, HENRY E III
700 E. UNION ST., #3J
JACKSONVILLE FL 32205

Delete

10. Name and Address of New Registered Agent

81 Name

James F. Hillencamp, II

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

11980 S.W. 94th St

83

Miami, FL. 33186

84 City

Miami

FL

85 Zip Code

33186

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Jim Hillencamp

(NOTE: Registered Agent signature required when reinstating)

8/6/98

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP
Genk, Henry E. III 700 E. Union St., #3J Jacksonville, Fl. 32205 ☒ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE V. West, Randall D. ☐ Change ☒ Addition
1.2 NAME
1.3 STREET ADDRESS 22179 S.W. 98th Place
1.4 CITY-ST-ZIP Miami, Fl. 33189

2.1 TITLE P. Hillencamp, II James F. ☐ Change ☒ Addition
2.2 NAME
2.3 STREET ADDRESS 11980 S.W. 94th St.
2.4 CITY-ST-ZIP Miami, Fl. 33186

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE 200002638802-110
4.2 NAME -12/01/98-01012-019
4.3 STREET ADDRESS ****558.75 ****558.75
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

SCC 11-19-98

14. 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 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 execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Jim Hillencamp

DATE

Randall D West 10/7/1998

CR2E034 (10/97)