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

PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
00 JUN 23 AM 8:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000061317

Corporation Name
RENAISSANCE REALTY GROUP, INC.

Principal Place of Business
PRESERVE TERRACE
FL 32746

Mailing Address
748 PRESERVE TERRACE
HEATHROW FL 32746

DO NOT WRITE IN THIS SPACE

Principal Place of Business 5332 SW Orchid Bay Dr Suite, Apt. #, etc.	2a. Mailing Address 26 5332 SW Orchid Bay Dr Suite, Apt. #, etc. 27	3. Date Incorporated or Qualified 07/10/1998 4. FEI Number 59-3523603	Applied For Not Applicable
City & State Palm City, FL Zip / Country 34990 25 US	City & State 28 Palm City, FL Zip / Country 29 34990 30 US	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
		7. This corporation owes the current year intangible Personal Property Tax	☐ Yes ☒ No

9. Name and Address of Current Registered Agent

DODT, HAROLD R
748 PRESERVE TERRACE
HEATHROW FL 32746

10. Name and Address of New Registered Agent

81 Name: Dodt, Harold R
82 Street Address (P.O. Box Number is Not Acceptable): 5332 SW Orchid Bay Dr
83
84 City: Palm City FL 85 Zip Code: 34990

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: Harold R Dodt 3-13-99

12. OFFICERS AND DIRECTORS

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 TITLE 1 2 NAME 1 3 STREET ADDRESS 1 4 CITY-ST-ZIP	☐ Change ☒ Addition	P Dodt, Harold R 5332 SW Orchid Bay Dr Palm City, FL 34990
2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS 2 4 CITY-ST-ZIP	☐ Change ☐ Addition	400003384634--2 -09/07/00--01004--025 ****150.00 ****150.00
3 1 TITLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY-ST-ZIP	☐ Change ☐ Addition	400003384634--2 -09/07/00--01004--026 ******8.75 ******8.75
4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CITY-ST-ZIP	☐ Change ☐ Addition	
5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY-ST-ZIP	☐ Change ☐ Addition	
6 1 TITLE 6 2 NAME 6 3 STREET ADDRESS 6 4 CITY-ST-ZIP	☐ Change ☐ Addition	

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, with all other like empowered.

SIGNATURE: Harold R Dodt 3-13-99 561-781-5505

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #