

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000078164

Entity Name: RENNY, INCORPORATED

**FILED**  
**Apr 10, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

3507 LEE BLVD  
STE #204  
LEHIGH ACRES, FL 33971

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1167  
LEHIGH ACRES, FL 33970

**New Mailing Address:**

FEI Number: 65-0862677

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ORLEBAR, RENFORD  
18161 HORIZON VIEW BLVD  
LEHIGH ACRES, FL 33972 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: S  
Name: ORLEBNR, SIMONE M  
Address: 18161 HORIZON VIEW BLVD  
City-St-Zip: LEHIGH ACRES, FL 33972

Title: S  
Name: ORLEBAR, SIMONE M  
Address: 18161 HORIZON VIEW BLVD  
City-St-Zip: LEHIGH ACRES, FL 33972

I hereby 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 all other like empowered.

SIGNATURE: SIMONE M ORLEBAR

S

04/10/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date