## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED May 05, 2005 8:00 am Secretary of State

DOCUMENT # 743848  1. Entity Name RAINBERRY BAY VILLAS ASSOCIATION, INC.					05-05-2005 90089 015 ****61.25				
	e of Business ERRY CIRCLE S. CH, FL 33445		tailing Address 2801 RAINBERRY CIRCLE S. DELRAY BEACH, FL 33445				RIET OTRI DIRI RITI		nos
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03082005 CI	hg-NP	CR2E037 (10	V03)		
City & Stat	e	City & State			4. FEI Number 59-187945	57		<u>_</u>	plied For t Applicable
Zip	Country	Zip	Cou	ıntry	5. Certificate of St	atus Desired		5 Add lequired	
	6. Name and Address of Current	Registered Agent			7. Name and Add	ress of New R	egistered Agent		
CARLANI	LOUIS FOO	<del>-</del>		Name					
CAPLAN, LOUIS ESQ SACHS, SAX, KLEIN				Street Address (P.O. Box Number is Not Acceptable)					
301 YAMA	TO RD, STE 4150						•		
BUCA KA	TON, FL 33431			City				ip Code	)
	named entity submits this statement for						<u> </u>		
	tions of registered agent.				No. 35 ago. 1, 51 50a, 11				and doospt
	Signature, typed or printed name of registered agent	t and title # applicable. (NOTE	E: Registered	d Agent signature requi	lred when reinstating)		DATE		
	Filing Fee is \$61.25 Due by May 1, 2005	9. Election Car Trust Fund C	npaign F	inancing	\$5.00 May Be Added to Fees		DATE lake check pay- ida Departmen		
10.	Filing Fee is \$61.25	9. Election Can Trust Fund C	npaign F	inancing	\$5.00 May Be	Flor	lake check pay- ida Departmen	t of St	ate
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The fleety certify that the information supplied with this titule does not quality for the exemption sales in section 113/15/10, mortial sales in the certify that the information supplied with this fleet 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 early, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617. 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

05/03/05/561-272-656E