2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Mar 08, 2004 08:00 AM **DOCUMENT # 749370 Secretary of State** 1. Entity Name THE VILLAS OF RAINBERRY HOMEOWNERS ASSOCIATION, INC. Mailing Address Principal Place of Business 2100 RAINBERRY LAKE DRIVE DELRAY BEACH FL 33445 235 NE 6TH AVENUE SUITE D DELRAY BEACH FL 33483 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) Applied For City & State City & State 4. FEI Number 59-2211762 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PUGH, DAVID Street Address (P.O. Box Number is Not Acceptable) 235 NE 6TH AVE SUITE D **DELRAY BEACH FL 33483** Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Florida Department of State Added to Fees Due By May 1, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Change Addition TITLE ☐ Delete TITLE DOWLING, JOHN C NAME NAME. U00000081621 2140 NW 12TH ST STREET ADDRESS STREET ADDRESS 03/08/04-80157-015 61.25 DELRAY BEACH FL 33445 CITY-ST-ZIP CITY-ST-ZIP TD ☐ Change Addition ☐ Delete TITLE TITLE PLONE, MICHAEL NAME NAME 1735 STREET ADDRESS STREET ADDRESS **DELRAY BEACH FL 33445** CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE CHAPMAN, DORIS NAME NAME 1350 NW 22ND AVE STREET ADDRESS STREET ADDRESS DELRAY BEACH FL 33445 CITY-ST-ZIP COY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE BELLAMY, RICHARD NAME NAME 2055 NW 16TH ST STREET ADDRESS STREET ADDRESS DELRAY BEACH FL 33445 CITY - ST - ZIP CITY - ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CMY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY+ST-ZIP 12. 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 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 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.

FILED

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