

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 12 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **749505** (4)  
1. Corporation Name  
**RAINBERRY LAKE HOMEOWNERS ASSOCIATION, INC.**

Principal Place of Business <b>2100 RAINBERRY LAKE DRIVE DELRAY BEACH FL 33445</b>	Mailing Address <b>1240 S FEDERAL HWY BOYNTON BCH FL 33435 US</b>
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified <b>10/25/1979</b>	4. FEI Number <b>59-1948378</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent  
**LADWIG, PATTI  
1645 PALM BEACH LAKES BLVD.  
SUITE 640  
WEST PALM BCH FL 33404**

10. Name and Address of New Registered Agent  
81 Name **John E. Schnebly**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**1229 NW 19th Terrace**  
83  
84 City **Delray Beach** FL 85 Zip Code **33445**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	KALTER, ROGER D.	
STREET ADDRESS	1900 NW 10TH ST.	
CITY-ST-ZIP	DELRAY BEACH FL 33445	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	BOBRICK, DANIEL S.	
STREET ADDRESS	1915 NW 9TH ST.	
CITY-ST-ZIP	DELRAY BEACH FL 33445	
TITLE	DP	<input checked="" type="checkbox"/> DELETE
NAME	GOSDIN, KAREN	
STREET ADDRESS	1925 NW 9TH ST.	
CITY-ST-ZIP	DELRAY BCH FL 33445	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	EUBANK, KEN	
STREET ADDRESS	2025 NW 9TH ST.	
CITY-ST-ZIP	DELRAY BEACH FL 33445	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	John E. Schnebly	
1.3 STREET ADDRESS	1229 NW 19th Terrace	
1.4 CITY-ST-ZIP	Delray Beach, FL 33445	
2.1 TITLE	Vice-President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Danny Michels	
2.3 STREET ADDRESS	1870 NW 10th Street	
2.4 CITY-ST-ZIP	Delray Beach, FL 33445	
3.1 TITLE	Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Constance R. Scott	
3.3 STREET ADDRESS	1915 NW 10th Street	
3.4 CITY-ST-ZIP	Delray Beach, FL 33445	
4.1 TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Grace M. Schnebly	
4.3 STREET ADDRESS	1229 NW 19th Terrace	
4.4 CITY-ST-ZIP	Delray Beach, FL 33445	
5.1 TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Charles Gosdin	
5.3 STREET ADDRESS	1925 NW 9th Street	
5.4 CITY-ST-ZIP	Delray Beach, FL 33445	
6.1 TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Richard A. Needham	
6.3 STREET ADDRESS	1227 NW 19th Terrace	
6.4 CITY-ST-ZIP	Delray Beach, FL 33445	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 199.07(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **JOHN E. SCHNEBLY** 3/3/98

CR2E037 (10/97)