

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 29, 2009
Secretary of State**

DOCUMENT# 757292

Entity Name: RAINTREE VILLAGE CONDOMINIUM NO.4 ASSOCIATION, INC.

Current Principal Place of Business:

1906 DREW STREET
CLEARWATER, FL 33765 US

New Principal Place of Business:

P.O. BOX 21622
ST. PETERSBURG, FL 33742 US

Current Mailing Address:

1906 DREW STREET
CLEARWATER, FL 33765 US

New Mailing Address:

FEI Number: 59-2118096 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRICE, TIM
1906 DREW STREET
CLEARWATER, FL 33765 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

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: THOMAS, PATRICIA
Address: 11712 C RAINTREE VILLAGE BLVD
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: SEC () Delete
Name: MILETTA, SUSAN
Address: 11718 B RAINTREE VILLAGE BLVD
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: TREA () Delete
Name: CULAR, ANDREA
Address: 11714 RAINTREE VILLAGE BLVD
City-St-Zip: TEMPLE TERRACE, FL 33617

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SEC (X) Change () Addition
Name: THOMAS, PATRICIA
Address: 11712 C RAINTREE VILLAGE BLVD
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: PRES (X) Change () Addition
Name: MILETTA, SUSAN
Address: 11718 B RAINTREE VILLAGE BLVD
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIM PRICE

Electronic Signature of Signing Officer or Director

MGR

03/29/2009

Date