## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # 757293**

1. Entity Name

No. of the last of

FILED

Secretary of State

Feb 13, 2003 8:00 am

02-13-2003 90229 016 \*\*\*\*61.25 RAINTREE VILLAGE PROPERTY OWNERS ASSICIATION.INC Mailing Address Principal Place of Business 7001 TEMPLE TERRACE HWY 7001 TEMPLE TERRACE HWY TEMPLE TERRACE FL 33637 TEMPLE TERRACE FL 33637 us 2. Principal Place of Business 3. Mailing Address Suite, Apt, #, etc. ☐ CHECK HERE IF MAKING CHANGES Suite, Apt. #, etc. Applied For 4. FEI Number 59-2106798 City & State City & State Not Applicable \$8.75 Additional Country Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name LEIB, PATRICIA ESQ. "Street Address" (P.O. Box Number is Not Acceptable) 420 W PLATT ST TAMPA FL 33606 Zip Code City FL 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Florida Department of State Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. OFFICERS AND DIRECTORS 10. ☐ Addition ☐ Change DVP ☐ Delete TITLE TITLE NAME NIEMAS, PAT NAME STREET ADDRESS 11804-B RAINTREE LAKE LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TEMPLE TERRACE FL 33617 ☐ Addition ☐ Change ☐ Delete TITLE PETTIGREW, NANCY NAME NAME STREET ADDRESS 11717 A RAINTREE VILLAGE BLVD STREET ADDRESS CITY-ST-ZIP **TAMPA FL 33617** CITY-ST-ZIP Addition DS. Motto, Theresa 11870 P Skulake Place TITLE NAME BECKER, JUNE NAME STREET ADDRESS **6013-E LAKE TREE LANE** STREET ADDRESS Temple Terrace, Fl CITY-ST-ZIP CITY-ST-ZIP TEMPLE TERRACE FL 33617 ☐ Addition ☐ Delete TITLE TITLE NAME SASOVETZ, RAY NAME STREET ADDRESS 11829-D SKYLAKE PL STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TEMPLE TERRACE FL 33617 Addition ☐ Change Delete TITLE TITLE HENNING, Robert PATRASCOIN, FLORIN NAME NAME STREET ADDRESS 6002 LAKE TREE LN #E STREET ADDRESS CITY-ST-ZiP CITY-ST-ZIP TEMPLE TERRACE FL 33617 ☐ Delete TITLE TITLE NAME NAME

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP