


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2006 8:00 am
Secretary of State

03-16-2006 90238 004 ****70.00

DOCUMENT # N13320			
1. Entity Name RED BARN ESTATES RESIDENTS' ASSOCIATION, INC.			
Principal Place of Business 5760 SW 18TH TERRACE LOT 233 BUSHNELL, FL 33513 US		Mailing Address 5760 SW 18TH TERRACE LOT 30 BUSHNELL, FL 33513 US	
2. Principal Place of Business		3. Mailing Address 5760 SW 18th TERRACE LOT 32	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State BUSHNELL, FL	
Zip	Country	Zip	Country
		33513	USA
4. FEI Number 59-3003562		Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
RICE, HARRY L 5760 SW 18TH TERR LOT 30 BUSHNELL, FL 33513		Name MARY (MOLLIE) WIEGAND	
		Street Address (P.O. Box Number is Not Acceptable) 5760 SW 18th TERRACE LOT 32	
		City BUSHNELL	
		FL Zip Code 33513	
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 <i>Mary (Mollie) Wiegand</i>		MARY (MOLLIE) WIEGAND	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)	
DATE 3/13/2006			
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	
		\$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CLAY, PAUL 5760 SW 18TH TER LOT 149 BUSHNELL, FL 33513 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BRYANT, PAM 5760 SW 18TH TER LOT 33 BUSHNELL, FL 33513 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GADDIS, HOWARD 5760 SW 18th TERR LOT 29 BUSHNELL, FL 33513 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RICE, HARRY L 5760 SW 18TH TERRACE LOT 30 BUSHNELL, FL 33513 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TROTTER, BRENDA 5760 SW 18TH TER LOT 45 BUSHNELL, FL 33513 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FELMETEN, KAREN 5760 SW 18th TER LOT 28 BUSHNELL, FL 33513 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WIEGAND, MARY (MOLLIE) 5760 SW 18th TER LOT 32 BUSHNELL, FL 33513 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.			
SIGNATURE: <i>Harry L Rice</i>		HARRY L. RICE	
Signature and typed or printed name of signing officer or director		Date	
		3/13/2006 352 7937569	
		Daytime Phone #	