2002 UNIFORM BUSINESS REPORT (UBR)

May 28, 2002 8:00 am Secretary of State **DOCUMENT # N20052** 1. Entity Name 04-02-2002 90956 016 ****61.25 RAINTREE INLET HOMEOWNERS ASSOCIATION. INC. Principal Place of Business Mailing Address 1908 68TH DR E PO BOX 524 **ELLENTON FL 34222 ELLENTON FL 34222** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2799296 Not Applicable Zip Country Zip Country \$8,75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ALAN DEGONZAGUE Street Address (P.O. Box Number is Not Acceptable) FOY, JAMES C 2212 6974 ST E ELLENTON'FL 34222 Zip Code 3422 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. SIGNATURE 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE (9/01) 🗘 Delete TITLE President X Change ☐ Addition SCHOENHERR, SUSAN 2111 68 TO DR D NAME NAME DE GONZAGUE, ALAN 2212 68th Dr E STREET ADDRESS STREET ADDRESS E037 **ELLENTON FL 34222** CITY-ST-ZIP CITY-ST-ZIP EUCOTON, EL 34222 TITLE ☐ Delete TITLE V.P + Treasurer Change ☐ Addition NAME SCHUTZ, MARILYN SCHUTZ, MARILYN-1908 68TH DY EAST ELLEATON, FL 34 NAME STREET ADDRESS 1908 68TH DR D STREET ADDRESS CITY-ST-ZIF ELLENTON FL 34222 CITY-ST-ZIP EACTETARY CAROLYN PDEGONZAGUE. - Delete TITI F Change ■ Addition **CHEG**ONZAGUE, ALAN NAME STREET ADDRESS 2122 68TH ST DR E 2209 68th DY EAST STREET ADDRESS CITY-ST-712 **ELLENTON FL 34222** CITY-ST-ZIP ELLENTON EL 34222 TITLE Delete TITLE Change Addition MOORY, RICK NAME NAME 2108 627H DR E ELLENTON FL 34222 STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition LAWLESS, CAROL NAME NAME STREET ADDRESS 2209 68TH DR E STREET ADDRESS CITY-ST-ZIP **ELLENTON FL 34222** CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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. AN DEGONZAGUE President

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED HAMBOF SIGNING OFFICER OR DIRECTOR

941-723-6507

FILED

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