


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 16, 2008 8:00 am**  
**Secretary of State**

04-16-2008 90033 004 \*\*\*\*61.25

**DOCUMENT # N95000005742**

1. Entity Name  
**RAINBOWS FIRST ADDITION HOMEOWNERS ASSOCIATION, INC.**



Principal Place of Business  
**C/O LARRY E. CIESLA, P.A.  
 204 W UNIVERSITY AVE SUITE 4  
 GAINESVILLE, FL 32601**

Mailing Address  
**P O BOX 357904  
 GAINESVILLE, FL 32635-7904 US**



2. Principal Place of Business - No P.O. Box #  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country

3. Mailing Address  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country

04122008 Chg-NP CR2E037 (12/06)

4. FEI Number  
**59-3354063**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**CIESLA, LARRY E  
 204 W UNIVERSITY AVE  
 SUITE 4  
 GAINESVILLE, FL 32601**

7. Name and Address of New Registered Agent

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

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

**Filing Fee is \$61.25  
 Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

**Make check payable to  
 Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
D	FRAINE, LISA	5021 NW 24TH DRIVE	GAINESVILLE, FL 32605	<input checked="" type="checkbox"/>
D	XIN, JIANNONG	5015 NW 24TH TERR	GAINESVILLE, FL 32605	<input type="checkbox"/>
D	CAZANOVA, GERARDO	2422 NW 52ND AVE	GAINESVILLE, FL	<input type="checkbox"/>
T	JANNEY, MYRNA	5006 NW 24TH TERR	GAINESVILLE, FL 32605	<input type="checkbox"/>
D	KIMBRELL, DON	2429 NW 52ND PLACE	GAINESVILLE, FL 32605	<input checked="" type="checkbox"/>
D	YANSKEY, DONALD	2421 NW 49TH AV	GAINESVILLE, FL 32605	<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
C	Peters, Jeannette	505 NW 24th Dr	Gainesville, FL 32605	<input type="checkbox"/>	<input checked="" type="checkbox"/>
S	manley, Barbara	5008 NW 24th Dr	Gainesville, FL 32605	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	Phillips, Frank	235 N W 49th AV	Gainesville, FL 32605	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:** *Jeannette Peter* **4/14/08** **352-371-7412**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #