

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726806

FILED
Apr 29, 2015
Secretary of State
CC0877399904

Entity Name: RAIN TREE VILLAGE CONDOMINIUM, INC.

Current Principal Place of Business:

24701 US HIGHWAY 19 NORTH #102
CLEARWATER, FL 33763

Current Mailing Address:

AMERI-TECH REALTY, INC.
24701 US HIGHWAY 19 NORTH #102
CLEARWATER, FL 33763 US

FEI Number: 59-1699128

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROWDER, KAREN
24701 US HIGHWAY 19 NORTH #102
CLEARWATER, FL 33763 US

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: KAREN BROWDER

04/29/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name MEGIVERN, KATHLEEN
Address 24701 US HIGHWAY 19 NORTH STE #102
City-State-Zip: CLEARWATER FL 33763

Title SD
Name EVANS , LEE
Address 24701 US HIGHWAY 19 NORTH STE #102
City-State-Zip: CLEARWATER FL 33763

Title TD
Name MASSON, BARBARA
Address 24701 US HIGHWAY 19 NORTH STE #102
City-State-Zip: CLEARWATER FL 33763

Title VPD
Name SCHMITTER, JOE
Address 24701 US HIGHWAY 19 NORTH STE #102
City-State-Zip: CLEARWATER FL 33763

Title DIR
Name MEMOLI, RALPH
Address AMERI-TECH REALTY, INC. 24701 US HIGHWAY 19 NORTH #102
City-State-Zip: CLEARWATER FL 33763

Title DIR
Name MARTIN, ALLIE
Address AMERI-TECH REALTY, INC. 24701 US HIGHWAY 19 NORTH #102
City-State-Zip: CLEARWATER FL 33763

Title DIR
Name SPENNER, JOHN
Address AMERI-TECH REALTY, INC. 24701 US HIGHWAY 19 NORTH #102
City-State-Zip: CLEARWATER FL 33763

Title DIR
Name MCCLURE, BETTY
Address AMERI-TECH REALTY, INC. 24701 US HIGHWAY 19 NORTH #102
City-State-Zip: CLEARWATER FL 33763

I hereby 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 all other like empowered.

SIGNATURE: KATHLEEN MEGIVERN

PD

04/29/2015

Electronic Signature of Signing Officer/Director Detail

Date