

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749505

Entity Name: RAINBERRY LAKE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**

G.R.S. MANAGEMENT ASSOCIATES, INC.
3900 WOODLAKE BLVD., SUITE 309
LAKE WORTH, FL 33463

Current Mailing Address:

G.R.S. MANAGEMENT ASSOCIATES, INC.
3900 WOODLAKE BLVD., SUITE 309
LAKE WORTH, FL 33463 US

FEI Number: 59-1948378**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**

HARTLEY-MORTON PA
800 VILLAGE SQUARE
PALM BEACH GARDENS, FL 33410 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name ARIDAS, PAULA
Address 1955 NW 10TH STREET
City-State-Zip: DELRAY BEACH FL 33445

Title D
Name MARMORSTEIN T, INA
Address 1080 NW 20TH AVE
City-State-Zip: DELRAY BEACH FL 33445

Title SD
Name HULY, JANET
Address 1970 NW 10TH STREET
City-State-Zip: DELRAY BEACH FL 33445

Title VPD
Name VITACOLONNA, STEPHEN
Address 1070 NW 18TH AVE
City-State-Zip: DELRAY BEACH FL 33445

Title D
Name SMULIK, ROBERT
Address 1060 NW 20TH AVENUE
City-State-Zip: DELRAY BEACH FL 33445

Title DT
Name WICKWIRE, KATHY
Address 940 RAINBERRY LAKE DR
City-State-Zip: DELRAY BEACH FL 33445

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: PAULA ARIDAS**PRESIDENT****03/18/2014**

Electronic Signature of Signing Officer/Director Detail

Date