

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 757293

**FILED**  
**Apr 01, 2014**  
**Secretary of State**  
**CC3881767246**

**Entity Name:** RAINTREE VILLAGE PROPERTY OWNERS ASSOCIATION, INC

**Current Principal Place of Business:**

9300 N 16TH ST  
TAMPA, FL 33612

**Current Mailing Address:**

9300 N 16TH ST  
TAMPA, FL 33612 US

**FEI Number: 59-2106798**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

WINFIELD, JANET  
9300 N. 16TH ST  
TAMPA, FL 33612 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:** JANET WINFIELD

04/01/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name SASOVETZ, RAYMOND  
Address 9300 N 16TH ST  
City-State-Zip: TAMPA FL 33612

Title S/T  
Name LESNIAK, ROSE  
Address 9300 N 16TH ST  
City-State-Zip: TAMPA FL 33612

Title D  
Name RHODEN, LEROY  
Address 9300 N 16TH ST  
City-State-Zip: TAMPA FL 33612

Title VP  
Name OSBORNE, RITA  
Address 9300 N 16TH ST  
City-State-Zip: TAMPA FL 33612

Title D  
Name SCOTT, BOBBY  
Address 9300 N 16TH ST  
City-State-Zip: TAMPA FL 33612

*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:** RAYMOND SASOVETZ

**PRESIDENT**

04/01/2014

Electronic Signature of Signing Officer/Director Detail

Date