## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38213

Entity Name: CINNABAR AT RAINBOW LAKES HOMEOWNERS

ASSOCIATION, INC.

**Current Principal Place of Business:** 

ASSOCIATED PROPERTY MGMT. 8135 LAKE WORTH ROAD SUITE B LAKE WORTH, FL 33467

## **Current Mailing Address:**

ASSOCIATED PROPERTY MGMT. 8135 LAKE WORTH ROAD SUITE B LAKE WORTH, FL 33467 US

FEI Number: 65-0203488 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CUNHA, JENNIFER ESQ. 601 HERITAGE DRIVE SUITF 424 JUPITER, FL 33458 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: JENNIFER CUNHA ESQ 03/20/2017

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title **TREASURER** 

Name CONGDON, REBECCA Name MARIETTA, ALLYSON

Address ASSOCIATED PROPERTY MGMT. Address ASSOCIATED PROPERTY MGMT.

8135 LAKE WORTH ROAD SUITE B 8135 LAKE WORTH ROAD SUITE B

LAKE WORTH FL 33467 LAKE WORTH FL 33467 City-State-Zip: City-State-Zip:

Title **SECRETARY** Title

MICHAUD, MARC Name Name PISCIOTTANO, GERALD

ASSOCIATED PROPERTY MGMT. ASSOCIATED PROPERTY MGMT. Address Address

8135 LAKE WORTH ROAD SUITE B 8135 LAKE WORTH ROAD SUITE B

City-State-Zip: LAKE WORTH FL 33467 City-State-Zip: LAKE WORTH FL 33467

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.

**FILED** Mar 20, 2017

Secretary of State

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