2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005742

Entity Name: RAINBOWS FIRST ADDITION HOMEOWNERS ASSOCIATION,

INC.

Apr 09, 2019 **Secretary of State** 4626498104CC

FILED

Current Principal Place of Business:

THOMAS MCDERMOTT, ESQ 901 NW 8TH AVENUE STE B-17 GAINESVILLE, FL 32601

Current Mailing Address:

POST OFFICE BOX 357904 GAINESVILLE, FL 32635-7904 US

FEI Number: 59-3354063 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

MCDERMOTT, THOMAS ESQ 901 NW 8TH AVENUE STE B-17 GAINESVILLE, FL 32601 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 **TREASURER** Title VC

Name JANNEY, MYRNA Name TAYLOR, MARILYN 5006 NW 24TH TER 5135 NW 24TH DR Address Address

City-State-Zip: GAINESVILLE FL 32605 City-State-Zip: GAINESVILLE FL 32605

Title **CHAIRMAN** Title **DIRECTOR**

Name HENDRICKSON, KATHY Name KIMBRELL, DON Address 5126 NW 24TH TER **2429 NW 52ND PLACE** Address City-State-Zip: GAINESVILLE FL 32605

City-State-Zip: GAINESVILLE FL 32605

Title DIRECTOR Title **SECRETARY** Name YOUSEY, LOLA

Name PETERSON, BRANDON Address 5031 NW 24TH DR Address 2309 NW 49TH AV

City-State-Zip: GAINESVILLE FL 32605 GAINESVILLE FL 32605 City-State-Zip:

Title **OFFICER**

Name PIEDRA, KAREN

2315 NW 52ND PLACE Address City-State-Zip: GAINESVILLE FL 32605

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: MYRNA B JANNEY **TREASURER** 04/09/2019