## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 222353**

Entity Name: RAINBOW ELECTRONICS, INCORPORATED

FILED Apr 30, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 81 NORTH 9TH STREET DEFUNIAK SPRINGS, FL 32433 **Current Mailing Address: New Mailing Address:** 81 NORTH 9TH STREET DEFUNIAK SPRINGS, FL 32433 FEI Number: 59-0865577 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GRICE, WARREN A 81 N 9TH STREET DEFUNIAK SPRINGS, FL 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition GRICE, WARREN A., Name: Name: 81 NORTH 9TH STREET Address: Address: City-St-Zip: DEFUNIAK SPRINGS, FL 32433 City-St-Zip: Title: Title: ( ) Delete (X) Change ( ) Addition GRICE, SHIRLEY, Name: Name: GRICE, JACKIE A 81 NORTH 9TH STREET 81 NORTH 9TH STREET Address: Address: DEFUNIAK SPRINGS, FL 32433 DEFUNIAK SPRINGS, FL 32433 City-St-Zip: City-St-Zip: Title: (X) Change ( ) Addition ( ) Delete Title: GRICE, SHIRLEY, DEAVER, KATHLEEN Name: Name: 81 NORTH 9TH STREET 81 NORTH 9TH STREET Address: Address: DEFUNIAK SPRINGS, FL 32433 City-St-Zip: DEFUNIAK SPRINGS, FL 32433 City-St-Zip: ( ) Delete Title: Title: () Change () Addition GRICE, WARREN A Name: Name: Address: 81 NORTH 9TH STREET Address: City-St-Zip: DEFUNIAK SPRINGS, FL 32433 City-St-Zip: Title: (X) Delete Title: () Change () Addition GRICE, WARREN A, Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: WARREN A. GRICE PV 04/30/2008

81 NORTH 9TH STREET

DEFUNIAK SPRINGS, FL 32433

Address: City-St-Zip: