

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 14 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **548533** (9)
1. Corporation Name
RAINBOW SPRINGS REALTY CORP.

Principal Place of Business % CHASE ENTERPRISES. ATTN: J. KORZENIK ONE COMMERCIAL PLAZA HARTFORD CT 06103	Mailing Address % CHASE ENTERPRISES. ATTN: J. KORZENIK ONE COMMERCIAL PLAZA HARTFORD CT 06103
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 10/05/1977	
				4. FEI Number 59-1772181	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent ST LOUIS, ROLAND R JR ST. LOUIS, GUERRA & AUSLANDER, P.A. 201 S. BISCAYNE BLVD. MIAMI CNT., 10TH FL. MIAMI FL 33131-4325				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	AV	1.1 TITLE	
NAME	TARBERT, FRANK	1.2 NAME	
STREET ADDRESS	19152 SW 81 PL RD -	1.3 STREET ADDRESS	8625 S/W 200th Circle
CITY-ST-ZIP	DUNNELLON FL	1.4 CITY-ST-ZIP	
TITLE	PD	2.1 TITLE	
NAME	CHASE, DAVID T	2.2 NAME	
STREET ADDRESS	ONE COMMERCIAL PLAZA	2.3 STREET ADDRESS	
CITY-ST-ZIP	HARTFORD CT	2.4 CITY-ST-ZIP	
TITLE	VSD	3.1 TITLE	
NAME	CHASE, ARNOLD L	3.2 NAME	
STREET ADDRESS	ONE COMMERCIAL PLAZA	3.3 STREET ADDRESS	
CITY-ST-ZIP	HARTFORD CT	3.4 CITY-ST-ZIP	
TITLE	VTD	4.1 TITLE	
NAME	CHASE, CHERYL A	4.2 NAME	
STREET ADDRESS	ONE COMMERCIAL PLAZA	4.3 STREET ADDRESS	
CITY-ST-ZIP	HARTFORD CT	4.4 CITY-ST-ZIP	
TITLE	V	5.1 TITLE	
NAME	SMALLRIDGE, LOWELL P.	5.2 NAME	
STREET ADDRESS	8150 S US HWY 41 -	5.3 STREET ADDRESS	8625 S/W 200th Circle
CITY-ST-ZIP	DUNNELLON FL	5.4 CITY-ST-ZIP	
TITLE	V	6.1 TITLE	
NAME	COLLINS, JAMES T	6.2 NAME	
STREET ADDRESS	19152 SW 81 PL RD -	6.3 STREET ADDRESS	8625 S/W 200th Circle
CITY-ST-ZIP	DUNNELLON FL	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Cheryl A. Chase

Cheryl A. Chase

3/27/98 (860) 549-1674

CR2E034 (10/97)