2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT #673805

1. Entity Name

RAINBOW STATION INC.



FILED Jan 24, 2008 08:00 AN **Secretary of State**

Principal Place of Business

3318 WILKINSON RD. SARASOTA, FL 34231 US

Mailing Address

3318 WILKINSON RD. SARASOTA, FL 34231

US



DO NOT WRITE IN THIS SPACE

CR2E034 (11/05) 01172008 No Chg-P

4. FEI Number 59-2035059 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WORTH, WILLIAM J 4441 DIAMOND CIR. WEST SARASOTA, FL 34233

DO NOT WRITE IN THIS SPACE

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8. 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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE						
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finant Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS		·	•	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WORTH, WILLIAM J 4441 DIAMOND CIRCLE WEST SARASOTA, FL 34233					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WORTH, MARJORIE S 4441 DIAMOND CIRCLE WEST SARASOTA, FL 34233				UG6000795816 01/29/08-80007-007 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WORTH, AMANDA 4441 DIAMOND CIRCLE WST SARASOTA, FL 34233			DO	DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				ÎN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE						

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

NAME STREET ADDRESS CITY-ST-ZIP