

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726806

FILED
Apr 01, 2009
Secretary of State

Entity Name: RAINTREE VILLAGE CONDOMINIUM, INC.

Current Principal Place of Business:

1799-B NORTH BELCHER ROAD
CLEARWATER, FL 33765 US

New Principal Place of Business:

24701 US HIGHWAY 19 NORTH #102
CLEARWATER, FL 33763 US

Current Mailing Address:

AMERI-TECH REALTY, INC.
1799-B NORTH BELCHER ROAD
CLEARWATER, FL 33765 US

New Mailing Address:

AMERI-TECH REALTY, INC.
24701 US HIGHWAY 19 NORTH #102
CLEARWATER, FL 33763 US

FEI Number: 59-1699128

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMERI-TECH REALTY, INC.
1799-B NORTH BELCHER ROAD
CLEARWATER, FL 33765 US

Name and Address of New Registered Agent:

AMERI-TECH REALTY, INC.
24701 US HIGHWAY 19 NORTH #102
CLEARWATER, FL 33763 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: MICHAEL G PEREZ, PRESIDENT

04/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MEGIVERN, KATHLEEN
Address: 2101 SUNSET PT. RD. #1701
City-St-Zip: CLEARWATER, FL 33765

Title: VPD () Delete
Name: ANDERSON, BLANCH
Address: 2101 SUNSET IV RD. #2302
City-St-Zip: CLEARWATER, FL 33765

Title: TD () Delete
Name: MASSON, BARBARA
Address: 2101 SUNSET POINT RD #1304
City-St-Zip: CLEARWATER, FL 33765

Title: SD () Delete
Name: EVANS, LEE
Address: 2101 SUNSET POINT RD #1802
City-St-Zip: CLEARWATER, FL 33765

Title: D () Delete
Name: SPENNER, JOHN
Address: 2101 SUNSET POINT ROAD, # 2102
City-St-Zip: CLEARWATER, FL 33765

Title: D () Delete
Name: NAVARRO, DIEGO
Address: 2101 SUNSET POINT RD #601
City-St-Zip: CLEARWATER, FL 33765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHLEEN MCGIVERN

PD

04/01/2009

Electronic Signature of Signing Officer or Director

Date