

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731147

FILED
Jan 21, 2009
Secretary of State

Entity Name: RAINTREE MANOR HOMES CONDOMINIUMS ASSOCIATION, INC.

Current Principal Place of Business:

7001 TEMPLE TERRACE HWY
TAMPA, FL 33637 US

New Principal Place of Business:

Current Mailing Address:

7001 TEMPLE TERRACE HWY
TEMPLE TERRACE, FL 33637 US

New Mailing Address:

FEI Number: 59-1723584

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEIB, PATRICIA
420 W PLATT ST
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KING, SUZANNE
Address: 11739 RAINTREE DR
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: SD () Delete
Name: MARSHALL, MARTHA
Address: 6225 GREENLEAF LANE
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: TD () Delete
Name: DRANSFIELD, LARRY
Address: 6202 GREENLEAF LN
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: VPD () Delete
Name: SANDAG, JOAN
Address: 6310 MORNINGMIST CT
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: D () Delete
Name: ROBERT, RIHM
Address: 6313 MORNINGMIST COURT
City-St-Zip: TEMPLE TERRACE, FL 33617

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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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: SUZANNE KING

P

01/21/2009

Electronic Signature of Signing Officer or Director

Date