

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Oct 26, 2009**  
**Secretary of State**

DOCUMENT# 731147

**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:**CIANFRONE, JOSEPH R ESQ.  
1964 BAYSHORE BOULEVARD  
DUNEDIN, FL 34698 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: JOSEPH R. CIANFRONE

10/26/2009

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:

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: SUZANNE KING

PD

10/26/2009

Electronic Signature of Signing Officer or Director

Date