

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 03, 2006 8:00 am
Secretary of State

03-03-2006 90121 017 ****61.25

DOCUMENT # 745955

1. Entity Name

RAINBOW SPRINGS PROPERTY OWNERS ASSOCIATION, INC.



Principal Place of Business

**8601 SW 190TH AVE RD
DUNNELLON FL 34432
US**

Mailing Address

**P O BOX 3389
DUNNELLON FL 34430-3389
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-1970697

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**STERMER, ROBERT A
7763 SW HIGHWAY 200
OCALA FL 34476**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **BERRY, HELEN**
STREET ADDRESS **19445 SW 101 PL RD**
CITY-ST-ZIP **DUNNELLON FL 34432**

TITLE **VD** ☒ Delete
NAME **GREGORY, NANCY**
STREET ADDRESS **18055 SW 73 LP**
CITY-ST-ZIP **DUNNELLON FL 34432**

TITLE **TD** ☐ Delete
NAME **MASSANET, TONY**
STREET ADDRESS **P.O. BOX 99**
CITY-ST-ZIP **DUNNELLON FL 34432**

TITLE **D** ☒ Delete
NAME **GREGORY, EDWARD**
STREET ADDRESS **18055 SW 73 LP**
CITY-ST-ZIP **DUNNELLON FL 34432**

TITLE **SD** ☐ Delete
NAME **FRITZ, CAROL**
STREET ADDRESS **9858 SW 195TH CIRCLE**
CITY-ST-ZIP **DUNNELLON FL 34432**

TITLE **D** ☐ Delete
NAME **BERNAL, JOHN**
STREET ADDRESS **9365 SW 201ST CIRCLE**
CITY-ST-ZIP **DUNNELLON FL 34432**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VD** ☐ Change ☒ Addition
NAME **KINGSMAN, ELIZABETH**
STREET ADDRESS **19238 SW 101 STREET**
CITY-ST-ZIP **DUNNELLON, FL 34432**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Change ☒ Addition
NAME **CARR, LEO**
STREET ADDRESS **19658 SW 88 LOOP**
CITY-ST-ZIP **DUNNELLON, FL 34432**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 617, 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.

SIGNATURE: *K Carol P Fritz*

CAROL P. FRITZ

2/22/06

352-489-1621