## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 745955**

FILED Jun 24, 2009 Secretary of State

Entity Name: RAINBOW SPRINGS PROPERTY OWNERS ASSOCIATION, INC.

	rincipal Place of Business:	New Principal Place of Business:
	190TH AVE RD LON, FL 34432 US	
urrent N	lailing Address:	New Mailing Address:
O BOX : JNNELL	3389 .ON, FL 344303389 US	
accordan	r: 59-1970697 FEI Number Applied For ( ace with s. 607.193(2)(b), F.S., the corporation d Address of Current Registered Age	did not receive the prior notice.
63 SW	R, ROBERT A HIGHWAY 200 L 34476 US	
	e named entity submits this statement fo e of Florida.	the purpose of changing its registered office or registered agent, or
GNATU	RE:	
	Electronic Signature of Registere	d Agent Date
FICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIREC
e: me: dress: y-St-Zip:	PD ( ) Delete FRANKENFIELD, ROBERT E 9911 SW 189TH CR. DUNNELLON, FL 34432	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
e: ne: dress:	VD ( ) Delete STRUDEVANT, GENE 7820 SW 188TH AVE DUNNELLON, FL 34432	Title: VD (X) Change ( ) Addition Name: FRITZ, CAROL Address: 9858 SW 195 CIRCLE City-St-Zip: DUNNELLON, FL 34432
y-St-Zip:		
	TD ( ) Delete MACK, RICHARD P 10159 SW 192ND CR. DUNNELLON, FL 34432	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
/-St-Zip: e: ne: lress:	MACK, RICHÀRD P 10159 SW 192ND CR.	Name: Address:
r-St-Zip: e: ne: lress: r-St-Zip: e: ne: lress:	MACK, RICHARD P 10159 SW 192ND CR. DUNNELLON, FL 34432  D () Delete MACLEOD, HARRY 9790 SW 194TH CIR	Name: Address: City-St-Zip:  Title: D (X) Change ( ) Addition Name: BOATTINI, ROBERT L Address: 9835 SW 191 ST AVE.

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: DICK LEMMA MGR 06/24/2009