

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 16, 2006 8:00 am
Secretary of State

06-16-2006 90103 032 ****61.25

DOCUMENT # 749505

1. Entity Name
RAINBERRY LAKE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
G.R.S. MANAGEMENT ASSOCIATES, INC.
3900 WOODLAKE BLVD., SUITE 309
LAKE WORTH, FL 33463

Mailing Address
G.R.S. MANAGEMENT ASSOCIATES, INC.
3900 WOODLAKE BLVD., SUITE 309
LAKE WORTH, FL 33463 US

4000000 -



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

05242006 Chg-NP CR2E037 (4/06)

City & State

City & State

4. FEI Number
59-1948378

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BAKALAR BROUGH & CHADROW, P.A.
150 SOUTH PINE ISLAND RD
SUITE 540
PLANTATION, FL 33324-2669

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

Filing Fee is \$61.25
Due by September 6, 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME CAPRIO, LISA
STREET ADDRESS 1120 NW 20TH AVE
CITY-ST-ZIP DELRAY BEACH, FL 33445

TITLE Christopher Ruggiano ☐ Change ☒ Addition
NAME 1310 NW 20th Ave
STREET ADDRESS Delray Bch. FL 33445
CITY-ST-ZIP Vice President

TITLE D ☒ Delete
NAME SPINA, ALFRED
STREET ADDRESS 1075 N.W. 19TH TER
CITY-ST-ZIP DELRAY BEACH, FL 33445

TITLE Bob Carroll ☐ Change ☒ Addition
NAME NW 18th Ave
STREET ADDRESS Delray Bch FL 33445
CITY-ST-ZIP Treasurer

TITLE VP ☒ Delete
NAME BUGEL, JANET
STREET ADDRESS 1100 NW 20TH AVE
CITY-ST-ZIP DELRAY BEACH, FL 33445

TITLE Janet Huly ☐ Change ☐ Addition
NAME 1970 NW 10th St
STREET ADDRESS Delray Bch FL 33445
CITY-ST-ZIP Secretary

TITLE D ☐ Delete
NAME SMULIK, ROBERT
STREET ADDRESS 1060 N.W. 28TH AVE.
CITY-ST-ZIP DELRAY BEACH, FL 33445

TITLE Paula Azidas ☐ Change ☒ Addition
NAME NW 10th St
STREET ADDRESS Delray Bch FL 33445
CITY-ST-ZIP Director

TITLE TD ☒ Delete
NAME NESTA, MARK
STREET ADDRESS 1175 NW 20TH AVE
CITY-ST-ZIP DELRAY BEACH, FL 33445

TITLE Kathy Wiekwire ☐ Change ☒ Addition
NAME Rainberry Lake Blvd
STREET ADDRESS Delray Bch FL 33445
CITY-ST-ZIP Director

TITLE SD ☒ Delete
NAME ARENCIBIA, YUSIMIR
STREET ADDRESS 1840 NW 10TH ST
CITY-ST-ZIP DELRAY BEACH, FL 33445

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 Chapter 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Lisa M. Caprio
LISA M. CAPRIO

5/30/06