2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2011
Secretary of State

DOCUMENT# 754208

Entity Name: RAINBOW LAKES COMMUNITY MASTER ASSOCIATION, INC.

Current Principal Place of Business:

3900 WOODLAKE BLVD
STE 309
LAKE WORTH, FL 33463 US

New Principal Place of Business:

Current Mailing Address:

3900 WOODLAKE BLVD
STE 309
LAKE WORTH, FL 33463 US

New Mailing Address:

FEI Number: 59-2420159 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

G.R.S. MANAGEMENT ASSOCIATES, INC.
3900 WOODLAKE BLVD
STE 309
LAKE WORTH, FL 33463 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
Name: KONYK, CHELLE
Address: 3900 WOODLAKE DRIVE #309
City-St-Zip: LAKE WORTH, FL 33462

Title: TREA
Name: UMBERGER, ED
Address: 3700 WOODLAKE DRIVE #309
City-St-Zip: LAKE WORTH, FL 33463

Title: D
Name: MARIANNE, HUGHES
Address: 3900 WOODLAKE DRIVE #309
City-St-Zip: LAKE WORTH, FL 33462

Title: D
Name: SCOTT, THERIAULT
Address: 3900 WOODLAKE DRIVE #309
City-St-Zip: LAKE WORTH, FL 33462

Title: D
Name: BALDWIN, WALTER
Address: 3900 WOODLAKE BLVD. #309
City-St-Zip: LAKE WORTH, FL 33462

Title: VP
Name: BORNSTEIN, ALLEN
Address: 3900 WOODLAKE BLVD. #309
City-St-Zip: LAKE WORTH, FL 33462

I hereby 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 all other like empowered.

SIGNATURE: CHELLE KONYK PRES 01/05/2011

Electronic Signature of Signing Officer or Director — Date