

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

**FILED**  
**Mar 21, 2006 8:00 am**  
**Secretary of State**

03-21-2006 90033 047 \*\*\*\*61.25

**DOCUMENT # 756524**

1. Entity Name

THE RAINBOWS HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

4709 RAINBOW DRIVE  
GREENACRES FL 33463  
US

Mailing Address

4709 RAINBOW DRIVE  
GREENACRES FL 33463  
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2124996

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

1st MOORE

CR2E037 (10/05)

6. Name and Address of Current Registered Agent

ASHER, KATHLEEN  
4713 RAINBOW DRIVE  
GREEN ACRES FL 33463

7. Name and Address of New Registered Agent

Name SARAH ANDREWS

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

6105 RAINBOW COURT

City

GREENACRES,

FL

Zip Code

33463

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

*Sarah E. Andrews (Pres.)*

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

(NOTE: Registered Agent signature required when reinstating)

3-10-06

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  
NAME ASHER, KATHLEEN  
STREET ADDRESS 4713 RAINBOW DR  
CITY-ST-ZIP GREENACRES FL 33463 ☒ Delete

TITLE VP  
NAME SCHULTZ, MARGE  
STREET ADDRESS 6119 RAINBOW CIRCLE  
CITY-ST-ZIP GREENACRES FL 33463 ☐ Delete

TITLE ~~PD~~  
NAME BARBOZA, MARIO I  
STREET ADDRESS 6109 RAINBOW CIRCLE  
CITY-ST-ZIP GREENACRES FL 33463 ☐ Delete

TITLE SD  
NAME BLUMENFELD, BEA  
STREET ADDRESS 4703 RAINBOW DRIVE  
CITY-ST-ZIP GREENACRES FL 33463 ☐ Delete

TITLE D  
NAME EDWARDS, BILL  
STREET ADDRESS 6138 RAINBOW CIRCLE  
CITY-ST-ZIP GREENACRES FL 33463 ☒ Delete

TITLE D  
NAME RYAN, ELMA  
STREET ADDRESS 6132 RAINBOW CIRCLE  
CITY-ST-ZIP GREENACRES FL 33463 ☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME ANDREWS, SARAH  
STREET ADDRESS 6105 RAINBOW COURT  
CITY-ST-ZIP GREENACRES, FL 33463 ☒ Change ☐ Addition

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

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

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

TITLE TR  
NAME MCCracken, Stanley  
STREET ADDRESS 6108 RAINBOW COURT  
CITY-ST-ZIP GREENACRES, FL 33463 ☒ Change ☐ Addition

TITLE D  
NAME KOUTEK, William  
STREET ADDRESS 4724 RAINBOW DRIVE  
CITY-ST-ZIP GREENACRES, FL 33463 ☒ Change ☐ Addition

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.

PLEASE NOTE: 2 ADDITIONS ATTACHED

SIGNATURE:

*Beatrice Blumenfeld (Beatrice Blumenfeld) Secretary March 3, 2006 541-641-3288*

ATTACHMENT  
40035677  
#756524

D PRICE, MAX ☒ ADDITION  
6122 RAINBOW CIRCLE  
GREENACRES, FL 33463

D SAFFIR, LEONARD ☒ ADDITION  
6137 RAINBOW CIRCLE  
GREENACRES, FL 33463

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