

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758091

FILED
Apr 09, 2009
Secretary of State

Entity Name: RAINTREE VILLAGE CONDOMINIUM NO. 5 ASSOCIATION, INC.

Current Principal Place of Business:

UNIVERSITY PROPERTIES
7001 TEMPLE TERR
TAMPA, FL 33637 US

New Principal Place of Business:

UNIVERSITY PROPERTIES
7001 TEMPLE TERRACE HWY.
TAMPA, FL 33637 US

Current Mailing Address:

UNIVERSITY PROPERTIES
7001 TEMPLE TERR
TAMPA, FL 33637 US

New Mailing Address:

UNIVERSITY PROPERTIES
7001 TEMPLE TERRACE HWY
TAMPA, FL 33637 US

FEI Number: 59-2147830

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEIB, PATRICIA
420 WEST PLATT STREET
TAMPA, FL 33606 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: S () Delete
Name: NUNEZ VICTOR
Address: 11703 B RAINTREE VILLAGE BLVD
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: T () Delete
Name: GREEN, LARRY
Address: 11721 RAINTREE VILLAGE BLVD
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: P () Delete
Name: CLESIA, MICHAEL
Address: 11703A RAINTREE VILLAGE BLVD.
City-St-Zip: TEMPLE TERRACE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: JENNINGS, DEBRA
Address: 11705 D RAINTREE VILLAGE BLVD
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHAEL CIESLA

PRES

04/09/2009

Electronic Signature of Signing Officer or Director

Date