

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770961

FILED  
Sep 09, 2008  
Secretary of State

**Entity Name:** RAIN TREE I AT HIDDEN VALLEY HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

SEDONA ROAD  
TALLAHASSEE, FL 32308 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 15554  
TALLAHASSEE, FL 323175554 US

**New Mailing Address:**

1432 OLDFIELD DR  
TALLAHASSEE, FL 32308- US

**FEI Number:** 59-3029822 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

HEWETT, L BRADLEY  
3353 SEDONA LANE  
TALLAHASSEE, FL 32308 US

**Name and Address of New Registered Agent:**

VAUGHN, THOMAS L VP  
1432 OLDFIELD DRIVE  
TALLAHASSEE, FL 32308 US

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: THOMAS L VAUGHN , VICE PRESIDENT

09/09/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HEWETT, BRADLEY  
Address: 3348 SEDONA ROAD  
City-St-Zip: TALLAHASSEE, FL 32308

Title: TD ( ) Delete  
Name: LINTON, FRANK S  
Address: 3350 SEDONA ROAD  
City-St-Zip: TALLAHASSEE, FL 32308

Title: VD (X) Delete  
Name: VAUGHN, THOMAS L  
Address: 3320 SEDONA ROAD  
City-St-Zip: TALLAHASSEE, FL 32308

Title: SD (X) Delete  
Name: BENTON, TARA L  
Address: 3345 SEDONA LANE  
City-St-Zip: TALLAHASSEE, FL 32308

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VP (X) Change ( ) Addition  
Name: VAUGHN, THOMAS L  
Address: 1432 OLDFIELD DRIVE  
City-St-Zip: TALLAHASSEE, FL 32308

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: THOMAS L VAUGHN

VP

09/09/2008

Electronic Signature of Signing Officer or Director

Date