

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H84024 (9)

1. Corporation Name

RAINBOW PROPERTY MAINTENANCE, INC.

Principal Place of Business

**C/O WILLIAM E. JONES
430 15TH STREET, N.W.
NAPLES FL 33964**

Mailing Address

**C/O WILLIAM E. JONES
430 15TH STREET, N.W.
NAPLES FL 33964**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/05/1985

3a. Date of Last Report

05/01/1994

4. FEI Number

59-2659379

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 190.042,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21. State, Apt. #, etc.

22. City & State

23. Zip Country

24. 25.

2a. Mailing Address

26. State, Apt. #, etc.

27. City & State

28. Zip Country

29. 30.

9. Name and Address of Current Registered Agent

**JONES, WILLIAM E.
430 15TH STREET, N.W.
NAPLES FL 33964**

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0605, Florida Statutes.

SIGNATURE

Signature of person authorized to file this report on behalf of the corporation

Signature of person authorized to file this report on behalf of the corporation

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
**P
JONES, WILLIAM E.
430 15TH STREET, N.W.
NAPLES FL**

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
**ST
JONES, BRIDGET A.
430 15TH STREET, N.W.
NAPLES FL**

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
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CITY, ST, ZIP

13.

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY, ST, ZIP
21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY, ST, ZIP
31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY, ST, ZIP
41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY, ST, ZIP
51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY, ST, ZIP
61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY, ST, ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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*****200.00**

5/1/96
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SIGNATURE:

William E. Jones

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/96

941-353-2609

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