

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # M92064 (8)

1. Corporation Name

RAINBOW TITLE COMPANY



Principal Place of Business

20702 W. PENNSYLVANIA AVE.
7800 - 113TH STREET NORTH, SUITE 206
DUNNELLON FL 34441
US

Mailing Address

% JONATHAN JAMES DAMONTE
7800 - 113TH STREET NORTH, SUITE 206
SEMINOLE FL 34642

2. Principal Place of Business

21 Sub, Apt, #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Sub, Apt, #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

DAMONTE, JONATHAN JAMES
7800 - 113TH STREET NORTH
SUITE 206
SEMINOLE FL 34642

3. Date Incorporated or Qualified

08/02/1988

3a. Date of Last Report

01/31/1995

4. FEI Number

59-2901253

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. 199.032,
Florida Statutes ☐ Yes ☐ No

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 607.0502 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0509, Florida Statutes.

SIGNATURE

Signature of Registered Agent (must be printed and dated)

Signature of Registered Agent (must be printed and dated)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

1.5 TITLE

1.6 NAME

1.7 STREET ADDRESS

1.8 CITY, ST, ZIP

1.9 TITLE

1.10 NAME

1.11 STREET ADDRESS

1.12 CITY, ST, ZIP

1.13 TITLE

1.14 NAME

1.15 STREET ADDRESS

1.16 CITY, ST, ZIP

1.17 TITLE

1.18 NAME

1.19 STREET ADDRESS

1.20 CITY, ST, ZIP

1.21 TITLE

1.22 NAME

1.23 STREET ADDRESS

1.24 CITY, ST, ZIP

1.25 TITLE

1.26 NAME

1.27 STREET ADDRESS

1.28 CITY, ST, ZIP

1.29 TITLE

1.30 NAME

1.31 STREET ADDRESS

1.32 CITY, ST, ZIP

1.33 TITLE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

1.5 TITLE

1.6 NAME

1.7 STREET ADDRESS

1.8 CITY, ST, ZIP

1.9 TITLE

1.10 NAME

1.11 STREET ADDRESS

1.12 CITY, ST, ZIP

1.13 TITLE

1.14 NAME

1.15 STREET ADDRESS

1.16 CITY, ST, ZIP

1.17 TITLE

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1.20 CITY, ST, ZIP

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1.22 NAME

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1.24 CITY, ST, ZIP

1.25 TITLE

1.26 NAME

1.27 STREET ADDRESS

1.28 CITY, ST, ZIP

1.29 TITLE

1.30 NAME

1.31 STREET ADDRESS

1.32 CITY, ST, ZIP

1.33 TITLE

SIGNATURE:

Jonathan James Damonte, Secretary
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Jonathan James Damonte, Secretary

1/31/96 (813) 398-2889
Date & Phone #

CR2E034 (12/95)