

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000008299

**FILED**  
**Jul 30, 2010**  
**Secretary of State**

**Entity Name:** R-BAR ESTATES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

7285 SW 9TH STREET  
OKEECHOBEE, FL 34974 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1396  
OKEECHOBEE, FL 34973 US

**New Mailing Address:**

**FEI Number:** 20-3856672

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LAFFERTY, JENNIFER  
2640 NE 62ND PARKWAY  
OKEECHOBEE, FL 34972 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:** PD  
**Name:** LAFFERTY, JENNIFER  
**Address:** 2640 NE 62ND PARKWAY  
**City-St-Zip:** OKEECHOBEE, FL 34972

**Title:** VD  
**Name:** MONROE, CARL  
**Address:** 2540 NE 60TH COURT  
**City-St-Zip:** OKEECHOBEE, FL 34972

**Title:** SD  
**Name:** RAYMAN, KAREN  
**Address:** 2528 NE 60TH COURT  
**City-St-Zip:** OKEECHOBEE, FL 34972

**Title:** T  
**Name:** EMMONDS, DEONNA  
**Address:** 2938 NE 62ND PARKWAY  
**City-St-Zip:** OKEECHOBEE, FL 34972

I hereby 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 all other like empowered.

**SIGNATURE:** DEONNA EMMONDS

T

07/30/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date