

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005726

FILED
Apr 29, 2009
Secretary of State

Entity Name: RAINBOW EMPLOYMENT AGENCY, INC.

Current Principal Place of Business:

2155 DOVEFIELD DRIVE
PENSACOLA, FL 32534

New Principal Place of Business:

Current Mailing Address:

2155 DOVEFIELD DRIVE
PENSACOLA, FL 32534

New Mailing Address:

FEI Number: 42-1711789

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCANTS, WOODROW W JR.
2155 DOVEFIELD DRIVE
PENSACOLA, FL 32534 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: P () Delete
Name: FOUNTAIN, DANNIE
Address: 3121 MELODY LANE
City-St-Zip: PENSACOLA, FL 32505 US

Title: V () Delete
Name: BROWN, BERNARD
Address: 1739 CONDOR DRIVE
City-St-Zip: CANTONMENT, FL 32533 US

Title: T () Delete
Name: MCCANTS, THERESA F
Address: 2155 DOVEFIELD DRIVE
City-St-Zip: PENSACOLA, FL 32534 US

Title: D () Delete
Name: MCCANTS, WOODROW W JR.
Address: 2155 DOVEFIELD DRIVE
City-St-Zip: PENSACOLA, FL 32534 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JOHNSON, BRIAN
Address: 6179 RINGGOLD CIRCLE
City-St-Zip: PENSACOLA, FL 32503 US

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

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: WOODROW W. MCCANTS, JR.

D

04/29/2009

Electronic Signature of Signing Officer or Director

Date