

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2008 8:00 am
Secretary of State

02-15-2008 90001 035 ****61.25

DOCUMENT # N08425 1. Entity Name RAINBOW FARMS NORTH HOMEOWNERS ASS'N, INC.					
Principal Place of Business 3040 TALL PINE DRIVE SAFETY HARBOR, FL 34695 US				Mailing Address 1732 PINE CREEK CT. SAFETY HARBOR, FL 34695 US	
2. Principal Place of Business - No P.O. Box # 1723 TALL PINE CIRCLE		3. Mailing Address 3040 TALL PINE DRIVE			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State SAFETY HARBOR, FL		City & State SAFETY HARBOR, FL		4. FEI Number 59-2686509	
Zip 34695		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DADDONO, SUSAN 1732 PINE CREEK CT. SAFETY HARBOR, FL 34695		7. Name and Address of New Registered Agent Name ELEANOR SOUCY Street Address (P.O. Box Number is Not Acceptable) 3040 TALL PINE DRIVE City SAFETY HARBOR FL Zip Code 34695			
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE ELEANOR SOUCY x <i>Eleanor Soucy</i> * 2/11/08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SOUCY, ELEANOR 3040 TALL PINE DRIVE SAFETY HARBOR, FL 34695	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER SOUCY, ELEANOR 3040 TALL PINE DRIVE SAFETY HARBOR, FL, 34695	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KEARNS, CONRAD 3015 TALL PINE DRIVE SAFETY HARBOR, FL 34695	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY RIGGS, LINDA 1804 PINE HILL DRIVE SAFETY HARBOR, FL 34695	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DADDONO, SUSAN 1732 PINE CREEK CT. SAFETY HARBOR, FL 34695	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT RICE, JOHN 1723 TALL PINE CIRCLE SAFETY HARBOR, FL 34695	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KRAFT, PATRICIA 3032 RAINBOW COURT SAFETY HARBOR, FL 34695	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CONSTANTINE, DEBRA 1818 PINE HILL DRIVE SAFETY HARBOR, FL 34695	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TIPPS, CAROL 1730 PINE HILL CRT SAFETY HARBOR, FL 34695	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: ELEANOR SOUCY x <i>Eleanor Soucy</i> * 2/11/08 (727) 812-4228 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					