2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08555

FILED Mar 09, 2009 Secretary of State

Entity Name: RAINTREE VILLAGE CONDOMINIUM NO. 9 ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

9300 N 16TH ST 16105 N. FLORIDA AVE 101 A

TAMPA, FL 336128698 US LUTZ, FL 33549 US

Current Mailing Address: New Mailing Address:

9300 N 16TH ST 16105 N. FLORIDA AVE 101 A

TAMPA, FL 336128698 US LUTZ, FL 33549 US

FEI Number: 59-2644286 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NEZER, STEVEN MEZER, STEVEN ATTY
1801 N. HIGHLAND AVE 1801 N. HIGHLAND AVE
TAMPA, FL 33602 US TAMPA, FL 33602 US

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: STEPHEN MEZER 03/09/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: VPT () Delete Title: VTD (X) Change () Addition

Name: TURNER, VIRGINIA L
Address: 16105 N. FLORIDA AVE #A

Name: TURNER, VIRGINIA L
Address: 16105 N. FLORIDA AVE #A

City-St-Zip: LUTZ, FL 33549 City-St-Zip: LUTZ, FL 33549

Title: PD () Delete Title: () Change () Addition

 Name:
 SASOVETZ, RAYMUND
 Name:

 Address:
 16105 N. FLORIDA AVE #A
 Address:

 City-St-Zip:
 LUTZ, FL 33549
 City-St-Zip:

Title: S () Delete Title: SD (X) Change () Addition

Name: LESNIAK, ROSE Name: LESNIAK, ROSE

Address: 16105 N. FLORIDA AVE #A Address: 16105 N. FLORIDA AVE #A

City-St-Zip: LUTZ, FL 33549 City-St-Zip: LUTZ, FL 33549

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: RAYMOND SASOVETZ PRES 03/09/2009