

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13946

FILED  
Mar 09, 2007  
Secretary of State

Entity Name: RAINTREE VILLAGE CONDOMINIUM NO. 13 ASSOCIATION, INC.

## Current Principal Place of Business:

9300 N 16TH ST  
101  
TAMPA, FL 336128698 US

## New Principal Place of Business:

9300 N 16TH ST  
101  
TAMPA, FL 33612 US

## Current Mailing Address:

9300 N 16TH ST  
101  
TAMPA, FL 336128698 US

## New Mailing Address:

9300 N 16TH ST  
101  
TAMPA, FL 33612 US

FEI Number: 65-0077850

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WINFIELD, JANET  
9300 N 16TH ST  
101  
TAMPA, FL 336128698 US

## Name and Address of New Registered Agent:

WINFIELD, JANET  
9300 N 16TH ST  
101  
TAMPA, FL 33612 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:

03/09/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SASOVETZ, RAYMOND E  
Address: 11869-N SKYLAKE PLACE  
City-St-Zip: TEMPLE TERRACE, FL

Title: VP ( ) Delete  
Name: CABRERA, EUGENE  
Address: 11865-M SKYLAKE PL  
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: ST ( ) Delete  
Name: DUCHARME, KRISITE  
Address: 11871-P SKYLAKE PL  
City-St-Zip: TAMPA, FL 33617

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SASOVETZ, RAYMOND E  
Address: 11869 SKYLAKE PLACE APT N  
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: VP (X) Change ( ) Addition  
Name: ALMONTE, GINA  
Address: 11867 SKYLAKE PLACE #O  
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: ST (X) Change ( ) Addition  
Name: DUCHARME, KRISITE  
Address: 11871 SKYLAKE PL #P  
City-St-Zip: TEMPLE TERRACE, FL 33617

I hereby certify that the information supplied with this filing does not qualify for the 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: JANET WINFIELD

AGEN

03/09/2007

Electronic Signature of Signing Officer or Director

Date