


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 23, 2005 8:00 am
Secretary of State

02-23-2005 90060 018 ****61.25

DOCUMENT # N16051			
1. Entity Name RAINTREE PROPERTY OWNERS ASSOCIATION, INC.			
Principal Place of Business 1130 NW 23RD TERR GAINESVILLE FL 32605 US		Mailing Address 1130 NW 23RD TERR GAINESVILLE FL 32605 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent HELLRUNG, DEE J 1130 NW 23 TERRACE GAINESVILLE FL 32605		7. Name and Address of New Registered Agent	
		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL Zip Code	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW: FEE IS \$61.25 Due By May 1, 2005		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	D BERN, RON <input checked="" type="checkbox"/> Delete	TITLE	T, D BERN, RON <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1301 NW 23 TERRACE	NAME	1301 NW 23 TERRACE
STREET ADDRESS	GAINESVILLE FL 32605	STREET ADDRESS	GAINESVILLE, FL 32605
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	PD HELLRUNG, DEE JAY <input checked="" type="checkbox"/> Delete	TITLE	D HELLRUNG, DEE JAY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1130 NW 23 TERR	NAME	1130 NW 23 TERR
STREET ADDRESS	GAINESVILLE FL 32605	STREET ADDRESS	GAINESVILLE, FL 32605
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	SD DIEKOW, LISA <input checked="" type="checkbox"/> Delete	TITLE	VD DOUG DIEKOW <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	2407 NW 13 PLACE	NAME	2407 NW 13 PLACE
STREET ADDRESS	GAINESVILLE FL 32605	STREET ADDRESS	GAINESVILLE, FL 32605
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	VD SAWYER, CYNTHIA <input checked="" type="checkbox"/> Delete	TITLE	P, D SAWYER, CYNTHIA <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1302 NW 23 TERR	NAME	1302 NW 23 TERR.
STREET ADDRESS	GAINESVILLE FL 32605	STREET ADDRESS	GAINESVILLE, FL 32605
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	TD BERARDO, DONNA <input checked="" type="checkbox"/> Delete	TITLE	S, D DAN DOBBS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	2432 NW 14 PLACE	NAME	2432 NW 13 PLACE
STREET ADDRESS	GAINESVILLE FL 32605	STREET ADDRESS	GAINESVILLE, FL 32605
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	



1st MOORE CR2E037 (10/04)

4. FEI Number 59-2711592 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Ronald Bern RONALD BERN, DIRECTOR & TREASURER
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 2-18-05 Daytime Phone # 352-335