


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 09, 2006 8:00 am
Secretary of State

05-09-2006 90067 041 ****61.25

DOCUMENT # N20147

1. Entity Name
RAINBOW MOBILE HOME OWNERS ASSOCIATION, INC.



Principal Place of Business Mailing Address

37910 EGG SHELL DR 37909 BENTLEY DR
 ZEPHYRHILLS FL 33541-7671 ZEPHYRHILLS FL 33542-2562
 US US



2. Principal Place of Business 3. Mailing Address

37906 Eggshell Drive *691 Briggs Hill Rd*

Suite, Apt. #, etc. Suite, Apt. #, etc.

1st MOORE CR2E037 (10/05)

City & State City & State

Zephyrhills, FL *Nichols, NY*

Zip Country Zip Country

33541 USA *13812 USA*

4. FEI Number **NO-T APPLICABLE** Applied For Not Applicable

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

6. Name and Address of Current Registered Agent

MCLAUGHLIN, JAMES
 37909 BENTLEY DR
 ZEPHYRHILLS FL 33541-7671

7. Name and Address of New Registered Agent

Name *Lila Hall*

Street Address (P.O. Box Number is Not Acceptable)
7019 Mint St

City *Zephyrhills* FL Zip Code *33541*

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 *Lila Hall* *Lila Hall* *4/28/06* DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	BULL, KEN	
STREET ADDRESS	37914 EGG SHELL DR	
CITY - ST - ZIP	ZEPHYRHILLS FL 33541	
TITLE	VD	<input type="checkbox"/> Delete
NAME	FOURNIA, JOE	
STREET ADDRESS	37911 EGG SHELL DR	
CITY - ST - ZIP	ZEPHYRHILLS FL 33541	
TITLE	STD	<input checked="" type="checkbox"/> Delete
NAME	ROBERTS, EDWARD	
STREET ADDRESS	37906 EGG SHELL DR	
CITY - ST - ZIP	ZEPHYRHILLS FL 33541-7671	
TITLE	D	<input type="checkbox"/> Delete
NAME	MC DONALD, PATRICIA	
STREET ADDRESS	7023 MINT ST	
CITY - ST - ZIP	ZEPHYRHILLS FL 33541	
TITLE	D	<input type="checkbox"/> Delete
NAME	COBLENTZ, PEGGY	
STREET ADDRESS	37910 EGG SHELL DR	
CITY - ST - ZIP	ZEPHYRHILLS FL 33541	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ed Miller	
STREET ADDRESS	7022 Maroon St	
CITY - ST - ZIP	Zephyrhills FL 33541	
TITLE	STD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Lila Hall	
STREET ADDRESS	691 Briggs Hill Rd	
CITY - ST - ZIP	Nichols, NY 13812	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Earl Wilkerson	
STREET ADDRESS	7030 Mint St	
CITY - ST - ZIP	Zephyrhills FL 33541	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Naomi Doyle	
STREET ADDRESS	37929 Eggshell Drive	
CITY - ST - ZIP	Zephyrhills, FL 33541	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Lila Hall* *Lila Hall* *4/28/06* *607-687-2332*