


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90864 032 ****61.25

DOCUMENT # N20147

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



Principal Place of Business
**37906 EGG SHELL DR
 ZEPHYRHILLS, FL 33541-7671 US**

Mailing Address
**691 BRIGGS HILL RD
 NICHOLS, NY 13812 US**

2. Principal Place of Business - No P.O. Box #
37929 Eggshell Drive

3. Mailing Address
 Suite, Apt. #, etc.

City & State
Zephyrhills FL

City & State
 Suite, Apt. #, etc.

Zip
33541

Country
USA



01312007 Chg-NP CR2E037 (12/06)

6. Name and Address of Current Registered Agent
**LILA HALL
 7019 MINT ST.
 ZEPHYRHILLS, FL 33541-7671**

4. FEI Number
NOT APPLICABLE

Applied For
 Not Applicable

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

7. Name and Address of New Registered Agent

Name
Naomi Doyle

Street Address (P.O. Box Number is Not Acceptable)
37929 Eggshell Drive

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 Naomi Doyle Naomi L. Doyle 4/26/07

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

**Filing Fee is \$61.25
 Due by May 1, 2007**

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 NAME STREET ADDRESS CITY-ST-ZIP | P BULL, KEN 37914 EGG SHELL DR ZEPHYRHILLS, FL 33541 | <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | FOURNIA, JOE 37911 EGG SHELL DR ZEPHYRHILLS, FL 33541 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D MILLER, ED 7022 MAROON ST. ZEPHYRHILLS, FL 335417671 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D MC DONALD, PATRICIA 7023 MINT ST ZEPHYRHILLS, FL 33541 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D COBLENTZ, PEGGY 37910 EGG SHELL DR ZEPHYRHILLS, FL 33541 | <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | STD HALL, LILA 691 BRIGGS HILL RD NICHOLS, NY 13812 | <input type="checkbox"/> Delete |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | |
|--|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD Marlene Bull 37914 Eggshell Drive Zephyrhills, FL 33541 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D Earl Wilkerson 7030 Mint Street Zephyrhills, FL 33541 | <input checked="" type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D Robert Tingley 37906 Cornflower Ave Zephyrhills, FL 33541 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD Don Huff 7026 Maroon St Zephyrhills, FL 33541 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D Ed Roberts 37906 Eggshell Drive Zephyrhills, FL 33541 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 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: Lila Mae Hall Lila M. Hall 4/26/07 607-687-2332

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #