

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21725

FILED
Apr 30, 2008
Secretary of State

Entity Name: RAINBOW HILLS ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 3444
SPRING HILL, FL 34611

New Principal Place of Business:

129 OAK LAKE DRIVE
SPRING HILL, FL 34611

Current Mailing Address:

P.O. BOX 3444
SPRING HILL, FL 34611

New Mailing Address:

FEI Number: 59-2904663 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SHUSTER, KIM B
125 OAK LAKE DRIVE
SPRING HILL, FL 34608 US

Name and Address of New Registered Agent:

WALTON, ROBERT B
125 OAK LAKE DRIVE
SPRING HILL, FL 34608 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: ROBERT WALTON

04/30/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SHUSTER, KIM
Address: 125 OAK LAKE DR
City-St-Zip: SPRING HILL, FL 34608

Title: S () Delete
Name: BALLARD, DENNIS
Address: 175 OAK LAKE DR
City-St-Zip: SPRING HILL, FL 34608

Title: TD () Delete
Name: PALLO, LINDA
Address: 181 OAK LAKE DR
City-St-Zip: SPRING HILL, FL 34608

Title: VP () Delete
Name: WALTON, ROBERT
Address: 129 OAK LAKE DR
City-St-Zip: SPRING HILL, FL 34608

Title: MD () Delete
Name: SHELLABARGER, JON
Address: 204 OAK LAKE DR
City-St-Zip: SPRING HILL, FL 34608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WALTON, ROBERT
Address: 129 OAK LAKE DR
City-St-Zip: SPRING HILL, FL 34608

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: KACERIK, LAURA
Address: 8372 LAKE HILL COURT
City-St-Zip: SPRING HILL, FL 34608

Title: MD (X) Change () Addition
Name: WILLIS, JANICE
Address: 172 OAK LAKE DRIVE
City-St-Zip: SPRING HILL, FL 34608

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: ROBERT WALTON

P

04/30/2008

Electronic Signature of Signing Officer or Director

Date