FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 27 AM 10:44

DOCUMENT # **N25407** **(0)**

1. Corporation Name

RAINBOW WOODS HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3316 AUGUSTINE RD. P.O. BOX 5751 SPRING HILL FL 34609-9107	3316 AUGUSTINE RD. P.O. BOX 5751 SPRING HILL FL 34609-9107

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/14/1988
3a. Date of Last Report: 03/08/1994
4. FEI Number: 59-2952024 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business 21	2a. Mailing Address 26	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
City & State 23	City & State 28	7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	$68.75 Supplemental Fee Not Required
Zip 24 / Country 25	Zip 29 / Country 30	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MAIORINO, ANGELO 11972 CONWAY STREET SPRING HILL FL 34609	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE		☐ Change ☐ Addition
NAME	MAGUIRE, GEORGE	12 NAME		
STREET ADDRESS	11331 ORANGEWOOD CT	13 STREET ADDRESS		
CITY-ST-ZIP	SPRING HILL FL	14 CITY-ST-ZIP		
TITLE	VD	21 TITLE	VICE PRESIDANT	☒ Change ☐ Addition
NAME	CONNOLLY, BETTY	22 NAME	RYAN, EDWARD	
STREET ADDRESS	11299 LONGHILL CT	23 STREET ADDRESS	11316 ORANGEWOOD COURT	
CITY-ST-ZIP	SPRING HILL FL	24 CITY-ST-ZIP	SPRINGHILL FLORIDA 34609	
TITLE	TD	31 TITLE		☐ Change ☐ Addition
NAME	MAIORINO, ANGELO	32 NAME		
STREET ADDRESS	11972 CONWAY ST	33 STREET ADDRESS		
CITY-ST-ZIP	SPRING HILL FL	34 CITY-ST-ZIP		
TITLE	SD	41 TITLE	SD	☒ Change ☐ Addition
NAME	KELLY, ELISE	42 NAME	GRELLA URSALA	
STREET ADDRESS	11988 CONWAY ST	43 STREET ADDRESS	11346 LONG HILL COURT	
CITY-ST-ZIP	SPRING HILL FL	44 CITY-ST-ZIP	SPRING HILL FLORIDA 34609	
TITLE	D	51 TITLE	D	☒ Change ☐ Addition
NAME	GREENWALD, DANIEL J	52 NAME	NOLAN KEVIN	
STREET ADDRESS	11298 ORANGEWOOD CT	53 STREET ADDRESS	11295 LONGHILL COURT	
CITY-ST-ZIP	SPRING HILL FL	54 CITY-ST-ZIP	SPRING HILL FLORIDA 34609	
TITLE	D	61 TITLE		☒ Change ☐ Addition
NAME	WEINMAN, DAVID S.	62 NAME	ELIMINATE	
STREET ADDRESS	11327 RAINBOW WOODS LOOP	63 STREET ADDRESS		
CITY-ST-ZIP	SPRING HILL FL	64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Angelo Maiorino 3/21/95 904-686-5493
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

006951