2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25407

FILED Jan 23, 2009 Secretary of State

Entity Name: RAINBOW WOODS HOMEOWNERS ASSOCIATION, INC.

	- micipai Fiace	e of Business:	New Principal P	lace of Business:	
	GUSTINE RD. HILL, FL 34609	99107			
Current Mailing Address:			New Mailing Ad	New Mailing Address:	
	GUSTINE ROAI HILL, FL 34609				
FEI Numbe	r: 59-2952024	FEI Number Applied For()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent:	Name and Addre	ess of New Registered Agent:	
	ANGELA DUNTRYWOOE HILL, FL 34609				
	e named entity te of Florida.	submits this statement for the p	ourpose of changing its regis	stered office or registered agent, or both,	
SIGNATU	JRE:				
	Electro	nic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Γitle:	Р () Delete	Title:	() Change () Addition	
Name: Nddress: City-St-Zip:	WELSH, ANGE 11323 COUNT SPRING HILL,	RYWOOD CT	Name: Address: City-St-Zip:	· , · · · · · · · · · · · · · · · · · ·	
Name: ∖ddress:	11323 COUNT SPRING HILL, VP (BELLUM, MAR 11256 RAINBO	RYWOOD CT FL 34609) Delete LYN DW WOODS LOOP	Address:	() Change () Addition	
lame: Address: City-St-Zip: lame: Address: City-St-Zip: lame: Address: Address:	11323 COUNT SPRING HILL, VP (BELLUM, MAR 11256 RAINBO SPRING HILL, S (FRANCESCHIN 11364 ORANG	RYWOOD CT FL 34609) Delete LYN DW WOODS LOOP FL 34609) Delete NA, ALICE EWOOD CT	Address: City-St-Zip: Title: Name: Address:		
Name: Address: City-St-Zip: Title: Name: Address:	11323 COUNT SPRING HILL, VP (BELLUM, MAR 11256 RAINBO SPRING HILL, S (FRANCESCHIN 11364 ORANG SPRING HILL, D (SULLIVAN, MA 11378 LONG H	RYWOOD CT FL 34609) Delete LYN W WOODS LOOP FL 34609) Delete NA, ALICE EWOOD CT FL 34609) Delete RY HILL COURT	Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	()Change()Addition	

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: C CAWLEY TREA 01/23/2009