2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38325

FILED Apr 07, 2007 Secretary of State

Entity Name: VILLAGE OF RAINBOW SPRINGS RESIDENTS' ORGANIZATION, INC.

Current Principal Place of Business: New Principal Place of Business: P O BOX 1609 19449 SW 82ND PL RD DUNNELLON, FL 34430 US DUNNELLON, FL 34430 US **Current Mailing Address: New Mailing Address:** P O BOX 1609 DUNNELLON, FL 34430 US FEI Number: 59-3012982 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BRETT, H. JAMES 511 E. PENNSYLVANIA AVE DUNNELLON, FL 32630 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete MACK, DICK KNECHTEL, ROGER Name: Name: 10159 SW 192ND CT Address: 19480SW100TH LOOP Address: City-St-Zip: DUNNELLON, FL 34432 City-St-Zip: DUNNELLON, FL 34432 Title: Title: (X) Change () Addition () Delete GHAN, JOHN Name: MENERA, DICK Name: Address: 19225 SW 90TH AVE Address: 19775 SW 93RD LN RD City-St-Zip: DUNNELLON, FL 34432 City-St-Zip: DUNNELLON, FL 34432 Title: () Delete Title: (X) Change () Addition BRUNNWORTH, R H REAGAN, BARNEY Name: Name: 19433 SW 82ND PL RD 19449 SW 82ND PL RD Address: Address: City-St-Zip: DUNNELLON, FL 34432 City-St-Zip: DUNNELLON, FL 34432 Title: () Delete Title: (X) Change () Addition Name: DEAN, EDNA Name: DECKER, NANCY 19757 SW 93RD LN RD. Address: Address: 19118SW 98TH LOOP City-St-Zip: DUNNELLON, FL 34431 City-St-Zip: DUNNELLON, FL 34432 Title: () Delete Title: () Change () Addition DAVIS, RUTH Name: Name: 9108 SW 197TH CIR Address: Address: City-St-Zip: DUNNELLON, FL 34432 City-St-Zip: Title: () Delete Title: () Change () Addition BRANCH, JILL Name: Name: Address: 8471 SW 196TH AV RD Address: DUNNELLON, FL 34432 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ROGER KNECHTEL P 04/07/2007