

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43863

FILED  
Jan 04, 2011  
Secretary of State

**Entity Name:** BLUFFS AT RAINBOW HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

20486 THE GRENADA  
DUNNELLON, FL 34432 US

**New Principal Place of Business:**

20486 THE GRANADA  
DUNNELLON, FL 34432 US

**Current Mailing Address:**

POB 2494  
DUNNELLON, FL 34430 US

**New Mailing Address:**

POBOX 2494  
DUNNELLON, FL 34430 US

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CROWLEY, MARGARET  
20486 THE GRANADA #5  
DUNNELLON, FL 34432 US

**Name and Address of New Registered Agent:**

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:**

Title: P  
Name: CROWLEY, MARGARET  
Address: 20486 THE GRANADA # 5  
City-St-Zip: DUNNELLON, FL 34432 US

Title: TD  
Name: PITTMAN, C. MICHAEL  
Address: 20486 THE GRANADA #6  
City-St-Zip: DUNNELLON, FL 34432 US

Title: O  
Name: DODGE, SHIRLEY A  
Address: 20486 THE GRANADA #4  
City-St-Zip: DUNNELLON,, FL 34432

Title: O  
Name: TEPOVICH, DANIEL  
Address: 20486 THE GRANADA #3  
City-St-Zip: DUNNELLON, FL 34432

Title: O  
Name: ALLEN, LINDA  
Address: 20486 THE GRANADA #7  
City-St-Zip: DUNNELLON, FL 34432

I hereby 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 all other like empowered.

SIGNATURE: MARGARET CROWLEY

P

01/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date