

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # N44037 (2)
1. Corporation Name
RAINTREE VILLAGE HOMEOWNERS ASSOCIATION, INC.

95 FEB -7 PM 4:28

Principal Place of Business

Mailing Address

2000 E. EDGEWOOD
SUITE 102
LAKE LAND FL 33813
US

P. O. BOX 2616
LAKE LAND FL 33806
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/21/1991 3a. Date of Last Report 04/05/1994

4. FEI Number 59-3142828 Applied For Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 2000 E. EDGEWOOD

22 City & State

27 SUITE 102

23 Zip

28 LAKE LAND FL

24 Country

29 33813

30 USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ \$68.75 Supplemental Fee Not Required

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

LADERER, EDWARD H., JR.
5087 IRONWOOD TRAIL
BARTOW, 33830

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME LADERER, EDWARD H JR
STREET ADDRESS 5087 IRONWOOD TRAIL
CITY- ST- ZIP BARTOW FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP

TITLE VD
NAME WILEY, CLIFFORD J
STREET ADDRESS 3589 RAIN TREE TER
CITY- ST- ZIP LAKE LAND FL

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 5719 EMERALD RIDGE BLVD
2.4 CITY- ST- ZIP LAKE LAND FL 33813

TITLE TD
NAME WILEY, PAULETTE T
STREET ADDRESS 3589 RAIN TREE TER
CITY- ST- ZIP LAKE LAND FL

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS 5719 EMERALD RIDGE BLVD
3.4 CITY- ST- ZIP LAKE LAND FL 33813

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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)(k), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EDWARD H. LADERER JR PD

2/1/95

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