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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N93000003274

1. Corporation Name

RAINBOWS END HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business  
2731 NW 41ST STREET B-3  
GAINESVILLE FL 32606  
US

Mailing Address  
2731 NW 41ST STREET B-3  
GAINESVILLE FL 32606  
US



2. Principal Place of Business  
21 4421 N.W. 39th Ave.

2a. Mailing Address  
26 4421 N.W. 39th Ave.

3. Date incorporated or Qualified  
07/21/1993

Suite, Apt. #, etc.  
22 Suite 1-2

Suite, Apt. #, etc.  
27 Suite 1-2

4. FEI Number  
59-3281160

Applied For  
Not Applicable

City & State  
23 Gainesville Florida

City & State  
28 Gainesville Florida

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

Zip Country  
24 32606 25 U.S.

Zip Country  
29 32606 30 U.S.

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JOHNSON, CARL E  
2731 NW 41 ST B3  
GAINESVILLE FL 32606

81 Name  
Carl L. Johnson

82 Street Address (P.O. Box Number is Not Acceptable)  
4421 N.W. 39th Avenue

83 Suite 1-2

84 City Gainesville FL 85 Zip Code 32606

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

*Carl E. Johnson* *Carl L. Johnson*

4/13/99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME GESSINESS, JOE  DELETE  
STREET ADDRESS 4530 N.W. 21ST DRIVE  
CITY-ST-ZIP GAINESVILLE FL 32605

1.1 TITLE VD  Change  Addition  
1.2 NAME Chaney, Edward  
1.3 STREET ADDRESS 4602 N.W. 21st Drive  
1.4 CITY-ST-ZIP Gainesville, FL 32605

TITLE VP  DELETE  
NAME MASSEY, JIMMY  
STREET ADDRESS 4616 NW 21ST STREET  
CITY-ST-ZIP GAINESVILLE FL 32605

2.1 TITLE TD  Change  Addition  
2.2 NAME Despointes, Clotilde Huyghues  
2.3 STREET ADDRESS 4624 N.W. 21st Terrace  
2.4 CITY-ST-ZIP Gainesville, FL 32605

TITLE S  DELETE  
NAME FRYE, JULIE  
STREET ADDRESS 4534 NW 21ST STREET  
CITY-ST-ZIP GAINESVILLE FL 32605

3.1 TITLE SD  Change  Addition  
3.2 NAME Lewis, Lisa  
3.3 STREET ADDRESS 4514 N.W. 21st Street  
3.4 CITY-ST-ZIP Gainesville, FL 32605

TITLE D  DELETE  
NAME SMOCK, ANDY  
STREET ADDRESS 4607 NW 21ST STREET  
CITY-ST-ZIP GAINESVILLE FL 32605

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

TITLE T  DELETE  
NAME GANTT, ROBIN  
STREET ADDRESS 4503 NW 21ST TERRACE  
CITY-ST-ZIP GAINESVILLE FL 32605

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

TITLE D  DELETE  
NAME BROWN, KEVIN  
STREET ADDRESS 4539 NW 20TH TERRACE  
CITY-ST-ZIP GAINESVILLE FL 32605

6.1 TITLE  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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, with all other like empowered.

SIGNATURE: *Carl E. Johnson* SIGNATURE REQUIRED

4-14-99 (352) 375-8211

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E037 (11/98)