

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 11, 2006  
Secretary of State**

DOCUMENT# N93000003274

Entity Name: RAINBOWS END HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4526 NW 20TH DRIVE  
GAINESVILLE, FL 32605 US

**New Principal Place of Business:**

**Current Mailing Address:**

4526 NW 20TH DRIVE  
GAINESVILLE, FL 32605 US

**New Mailing Address:**

FEI Number: 59-3281160      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

GESSINESS, JOE  
4530 N. W. 21ST DR.  
GAINESVILLE, FL 32605 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: PD ( ) Delete  
Name: GESSINESS, JOE  
Address: 4530 N.W. 21ST DRIVE  
City-St-Zip: GAINESVILLE, FL 32605

Title: VD ( ) Delete  
Name: CHANEY, EDWARD  
Address: 4602 N.W. 21ST DRIVE  
City-St-Zip: GAINESVILLE, FL 32605

Title: SEC ( ) Delete  
Name: MAGGIO, SYLVIA  
Address: 4612 NW 21ST DRIVE  
City-St-Zip: GAINESVILLE, FL 32605

Title: T ( ) Delete  
Name: GRAVES-GUILLETTE, SUMMER  
Address: 4526 NW 20TH DRIVE  
City-St-Zip: GAINESVILLE, FL 32605

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: GESSINESS, JOE  
Address: 4530 N.W. 21ST DRIVE  
City-St-Zip: GAINESVILLE, FL 32605

Title: VP (X) Change ( ) Addition  
Name: SCHNOLL, MARC  
Address: 4528 N.W. 20TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32605

Title: SEC (X) Change ( ) Addition  
Name: GRAVES-GUILLETTE, SUMMER  
Address: 4526 N.W. 20TH DRIVE  
City-St-Zip: GAINESVILLE, FL 32605

Title: TREA (X) Change ( ) Addition  
Name: GRAVES-GUILLETTE, SUMMER  
Address: 4526 N.W. 20TH DRIVE  
City-St-Zip: GAINESVILLE, FL 32605

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: SUMMER GRAVES-GUILLETTE

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

SEC

01/11/2006

\_\_\_\_\_  
Date