2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003274

Jul 22, 2008 Secretary of State

Entity Name: RAINBOWS END HOMEOWNERS ASSOCIATION, INC.

New Principal Place of Business: Current Principal Place of Business: 4530 NW 21ST DRIVE GAINESVILLE, FL 32605 US **Current Mailing Address: New Mailing Address:** 4530 NW 21ST DRIVE GAINESVILLE, FL 32605 US FEI Number: 59-3281160 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GESSINESS, JOE 4530 N. W. 21ST DR. GAINESVILLE, FL 32605 US 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: **PRES** () Change () Addition () Delete GESSINESS, JOE Name: Name: 4530 N.W. 21ST DRIVE Address: Address: City-St-Zip: GAINESVILLE, FL 32605 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: GRAVES, SUMMER Name: CHANEY, EDWARD Address: 4526 NW 20TH DRIVE Address: 4602 NW 21ST DRIVE City-St-Zip: GAINESVILLE, FL 32605 City-St-Zip: GAINESVILLE, FL 32605 () Delete Title: SEC Title: SEC (X) Change () Addition GUILLETTE, MATTHEW MCCRACKEN, STACIA Name: Name: 4526 N.W. 20TH DRIVE 4520 N.W. 21ST DRIVE Address: Address: City-St-Zip: GAINESVILLE, FL 32605 City-St-Zip: GAINESVILLE, FL 32605 Title: TREA () Delete Title: TREA (X) Change () Addition Name: GRAVES, SUMMER Name: BLAZO, SUSAN Address: 4526 N.W. 20TH DRIVE Address: 4531 NW 21ST DRIVE City-St-Zip: GAINESVILLE, FL 32605 City-St-Zip: GAINESVILLE, FL 32605

I hereby certify that the information supplied with this filing does not qualify 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: SUSAN BLAZO **TREA** 07/22/2008