

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N93000003565 (9)

1. Corporation Name

RAINBOW SQUARES INCORPORATED OF DUNNELLON, FLORIDA



Principal Place of Business

C/O WILMA E. CRAMER
3741 N. GOLDENCUP TERR.
BEVERLY HILLS FL 34465

Mailing Address

C/O WILMA E. CRAMER
3741 N. GOLDENCUP TERR.
BEVERLY HILLS FL 34465

2. Principal Place of Business **SANDY OAKS**
MOBILE HOME PARK REG HALL

2a. Mailing Address
C/O WALTER L. MORRIS, JR.

22. **6760 N. LECANTO HWY**

27. **6838 E. QUEENSBURY LN**

23. **BEVERLY HILLS, FL**

28. **INVERNESS, FL**

24. **34465**

29. **34452**

9. Name and Address of Current Registered Agent

CRAMER, WILMA
3741 N. GOLDENCUP TERR.
BEVERLY HILLS FL 34465

3. Date Incorporated or Qualified
08/06/1993

3a. Date of Last Report
01/25/1995

4. FEI Number
59-3191629

Applied For
Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81. Name
WALTER L. MORRIS, JR.

82. Street Address (P.O. Box Number is Not Acceptable)
6838 E. QUEENSBURY LN

83.

84. City
INVERNESS

FL 85. Zip Code
34452

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 *Walter L. Morris, Jr.*

WALTER L. MORRIS, JR.

JAN 20, 96

12. OFFICERS AND DIRECTORS

11.1 TITLE	PD	☐ DELETE
11.2 NAME	HALL, SPARKY	
11.3 STREET ADDRESS	1571 E. SHERIDAN LANE	
11.4 CITY-STATE-ZIP	HERNANDO FL	
11.5 TITLE	TD	☒ DELETE
11.6 NAME	CRAMER, WILMA	
11.7 STREET ADDRESS	3741 N. GOLDEN CUP	
11.8 CITY-STATE-ZIP	BEVERLY HILLS FL 34465	
11.9 TITLE	VD	☐ DELETE
11.10 NAME	MARTINEZ, ALBERT P.	
11.11 STREET ADDRESS	23013 W. HWY. 40, PO BOX 328	
11.12 CITY-STATE-ZIP	DUNNELLON FL	
11.13 TITLE	SD	☐ DELETE
11.14 NAME	NEWS, ESTHER	
11.15 STREET ADDRESS	1045 W. KINGSWAY PL.	
11.16 CITY-STATE-ZIP	CITRUS SPRINGS FL	
11.17 TITLE		☐ DELETE
11.18 NAME		
11.19 STREET ADDRESS		
11.20 CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE		☐ Change ☒ Addition
13.2 NAME		
13.3 STREET ADDRESS		
13.4 CITY-STATE-ZIP		
13.5 TITLE	TD	☐ Change ☒ Addition
13.6 NAME	WALTER L. MORRIS, JR.	
13.7 STREET ADDRESS	6838 E. QUEENSBURY LN.	
13.8 CITY-STATE-ZIP	INVERNESS, FL 34452	
13.9 TITLE		☐ Change ☒ Addition
13.10 NAME		
13.11 STREET ADDRESS		
13.12 CITY-STATE-ZIP		
13.13 TITLE		☐ Change ☒ Addition
13.14 NAME		
13.15 STREET ADDRESS		
13.16 CITY-STATE-ZIP		
13.17 TITLE		☐ Change ☐ Addition
13.18 NAME		
13.19 STREET ADDRESS		
13.20 CITY-STATE-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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Walter L. Morris, Jr.* **WALTER L. MORRIS, JR. JAN 20, 96 (352) 637-4212**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E037 (12/95)