2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N94000003081

FILED Dec 08, 2005 Secretary of State

Entity Name: CHIPOLA RAINBOW HOMEBUILDERS ASSOCIATION INC.

Littly Nai	He. CHIPOLA RAINBOW HOWLBUILDERS ASS	DCIATION, INC.
Current Principal Place of Business:		New Principal Place of Business:
	B ORANGE ST A, FL 32446 US	2880 UNIT B ORANGE ST MARIANNA, FL 32448 US
Current Mailing Address:		New Mailing Address:
PO BOX 9 [,] MARIANN	17 A, FL 32447 US	2880 UNIT B ORANGE ST. MARIANNA, FL 32448 US
	59-3267421 FEI Number Applied For() FEI ce with s. 607.193(2)(b), F.S., the corporation did not recei	Number Not Applicable () Certificate of Status Desired () ve the prior notice.
Name and	Address of Current Registered Agent:	Name and Address of New Registered Agent:
	ELMORE NGE STREET A, FL 32446 US	BRYANT, ELMORE 2814 ORANGE STREET MARIANNA, FL 32448 US
	named entity submits this statement for the purpose of Florida.	se of changing its registered office or registered agent, or both,
SIGNATUF	RE: ELMORE BRYANT	12/08/2005
	Electronic Signature of Registered Agent	Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	D () Delete MILTON, HOWARD 4215 HICKORY LANE MARIANNA, FL 32446	Title: D (X) Change () Addition Name: MILTON, HOWARD Address: 4215 HICKORY LANE City-St-Zip: MARIANNA, FL 32448
Title: Name: Address: City-St-Zip:	T () Delete CASTLEBERRY, MICHAEL 2810 STUART ST MARIANNA, FL 32448	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	P () Delete TINSLEY, LESTER 4387 KELLY AVENUE MARIANNA, FL 32446	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	S () Delete HAMPTON, THAISE 106 FAIRVIEW ROAD MARIANNA, FL 32448	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete YOUNG, MARY 4253 ELM STREET MARIANNA, FL 32448	Title: () Change () Addition Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ELMORE BRYANT DIR 12/08/2005