

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003081

FILED
Jul 25, 2006
Secretary of State

Entity Name: CHIPOLA RAINBOW HOMEBUILDERS ASSOCIATION, INC.

Current Principal Place of Business:

2880 UNIT B ORANGE ST
MARIANNA, FL 32448 US

New Principal Place of Business:

Current Mailing Address:

2880 UNIT B ORANGE ST.
MARIANNA, FL 32448 US

New Mailing Address:

FEI Number: 59-3267421 **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:

BRYANT, ELMORE
2814 ORANGE STREET
MARIANNA, FL 32448 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: D () Delete
Name: MILTON, HOWARD
Address: 4215 HICKORY LANE
City-St-Zip: MARIANNA, FL 32448

Title: T () Delete
Name: CASTLEBERRY, MICHAEL
Address: 2810 STUART ST
City-St-Zip: MARIANNA, FL 32448

Title: P () Delete
Name: TINSLEY, LESTER
Address: 4387 KELLY AVENUE
City-St-Zip: MARIANNA, FL 32446

Title: S () Delete
Name: HAMPTON, THAISE
Address: 106 FAIRVIEW ROAD
City-St-Zip: MARIANNA, FL 32448

Title: D () Delete
Name: YOUNG, MARY
Address: 4253 ELM STREET
City-St-Zip: MARIANNA, FL 32448

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: ELMORE BRYANT

EXC/

07/25/2006

Electronic Signature of Signing Officer or Director

Date