

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 30, 2006 08:00 AM
Secretary of State

DOCUMENT # N95000000644

1. Entity Name

RAINBOW LAKES UNITED METHODIST CHURCH INC.



Principal Place of Business

19656 SW BEACH BLVD.
DUNNELLON FL 34431

Mailing Address

19656 SW BEACH BLVD.
DUNNELLON FL 34431



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2156231

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HENION, ROBIN R
21280 SW MARINE BLVD
DUNNELLON FL 34431

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME GENTRY, ROBERT
STREET ADDRESS 3675 SW POMPANO
CITY-ST-ZIP DUNNELLON FL 34431

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS 1000001464928
CITY-ST-ZIP 04/12/06 00061-023 61.25

TITLE ☐ Delete
NAME RICHIE, CALVIN
STREET ADDRESS 4280 SW DEEPWATER CT
CITY-ST-ZIP DUNNELLON FL 34431

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME MOWREY, CHARLES
STREET ADDRESS 10775 SW 186 CIRCLE
CITY-ST-ZIP DUNNELLON FL 34432

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME HENION, ROBIN
STREET ADDRESS 21280 SW MARINE BLVD
CITY-ST-ZIP DUNNELLON FL 34431

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Robin R. Henion*

4/5/06 853-469-2267