

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 02, 2007 08:00 AM
Secretary of State

DOCUMENT # N97000007229

1. Entity Name

RAINBOW VILLAGE R.V. ASSOCIATION, INC.



Principal Place of Business

4150 LANE ROAD
ZEPHYRHILLS, FL 33540

Mailing Address

4150 LANE ROAD
ZEPHYRHILLS, FL 33540



01302007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3488053

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WALKER, CHARLES D
37927 LIVE OAK AVENUE
DADE CITY, FL

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IN THIS SPACE**

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 No Change

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

1-31-07

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME HALL, TED
STREET ADDRESS 37628 ELDER
CITY-ST-ZIP ZEPHYRHILLS, FL 33541

TITLE VP
NAME CRAIG, MARGE
STREET ADDRESS 37610 ELDER
CITY-ST-ZIP ZEPHYRHILLS, FL 33541

TITLE DT
NAME WRIGHT, DON
STREET ADDRESS 37633 BIRCHCREST
CITY-ST-ZIP ZEPHYRHILLS, FL 33541

TITLE DS
NAME LYIKINS, JUDY
STREET ADDRESS 37627 ELDER
CITY-ST-ZIP ZEPHYRHILLS, FL 33541

TITLE T
NAME ELLIOTT, DICK
STREET ADDRESS 37621 DAY BRIGHT
CITY-ST-ZIP ZEPHYRHILLS, FL 33541

TITLE T
NAME ABLE, SANDY
STREET ADDRESS 37532 ELDER
CITY-ST-ZIP ZEPHYRHILLS, FL 33541

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02/08/07-80052-003 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Donald E Wright Treasurer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-31-07 813-779-9863

Date

Daytime Phone #