2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000112339

Entity Name: RAINBOW SPRINGS COMMUNITY REALTY, INC.

FILED Feb 16, 2009 Secretary of State

Current Principal Place of Business:			New Prince	New Principal Place of Business:		
	. 200TH CIRCL LON, FL 34431	E				
Current Mailing Address:			New Mailing Address:			
8625 S.W. 200TH CIRCLE DUNNELLON, FL 34431			PO BOX 99 DUNNELLON, FL 34430			
FEI Number: 59-3758979 FEI Number Applied For ()			FEI Number Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
	1ARTHA A 200TH CIRCLE LON, FL 34431	US				
	e named entity s e of Florida.	submits this statement for the	purpose of changing	its registered	d office or registered agent, or both,	
SIGNATUI	RE:					
	Electron	ic Signature of Registered Ag	ent		Date	
Election Car	mpaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () Delete CLARKE, THOMAS A 760 PACIFIC ROAD, SUITE 24 OAKVILLE, ONTARIO CANADA, L6L 6M5		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete NEWMAN, DON 760 PACIFIC ROAD, SUITE 24 OAKVILLE, ONTARIO CANADA, L6L 6M5		Title: Name: Address: City-St-Zip:	Name: NEWMAN, DON Address: 8625 SW 200TH CIRCLE		
Title: Name: Address: City-St-Zip:	D () Delete COLLINS, JAMES T 8625 S.W. 200TH CIRCLE DUNNELLON, FL 34431		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D () KYKER, MARTH 8625 SW 200TH DUNNELLON, F	H CIRCLE	Title: Name: Address: City-St-Zip:		() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES T COLLINS D 02/16/2009