

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000071754

Entity Name: RAINBOW TRUST, INC.

FILED  
May 17, 2007  
Secretary of State

## Current Principal Place of Business:

2216 ASHLEY CT  
OCALA, FL 34471

## New Principal Place of Business:

1305 E. FORT KING STREET  
OCALA, FL 34471

## Current Mailing Address:

P O BOX 190  
OCALA, FL 34478 US

## New Mailing Address:

FEI Number: 59-3232394

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TROW, CHESTER J PA  
21 NORTH MAGNOLIA AVE.  
2ND FLOOR  
OCALA, FL 34470 US

## Name and Address of New Registered Agent:

CLARK, DAVID W  
1305 E. FORT KING STREET  
OCALA, FL 34471 US

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: DAVID W. CLARK

05/17/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: CLARK, JACK A  
Address: 2216 ASHLEY COURT  
City-St-Zip: OCALA, FL 34471

Title: VSD ( ) Delete  
Name: CLARK, DOROTHY B  
Address: 2216 ASHLEY CT  
City-St-Zip: OCALA, FL 34471

Title: VP (X) Delete  
Name: CLARK, DAVID W  
Address: PO BOX 6315  
City-St-Zip: OCALA, FL 34478

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: CLARK, DAVID W  
Address: 1305 E. FORT KING STREET  
City-St-Zip: OCALA, FL 34471

Title: SEC (X) Change ( ) Addition  
Name: SHARON, CLARK K  
Address: P. O. BOX 6315  
City-St-Zip: OCALA, FL 34478

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

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: DAVID W. CLARK

PTD

05/17/2007

Electronic Signature of Signing Officer or Director

Date