

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # P95000058611

1. Entity Name
RAINFLOW OF TAMPA BAY, INC.



Principal Place of Business
**6207 NORTH FLORIDA AVE.
TAMPA, FL 33604**

Mailing Address
**6207 NORTH FLORIDA AVE.
TAMPA, FL 33604**



04302004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3326979

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**HUNTER, DENNIS C
6207 NORTH FLORIDA AVE.
TAMPA, FL 33604**

**DO NOT WRITE
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

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

(NOTE: Registered Agent signature required when reinstalling)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$650.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

U000000154747
05/05/04 80000-015 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	HUNTER, DENNIS C
STREET ADDRESS	3190 W. DE BAZAN AVE
CITY - ST - ZIP	ST PETE BCH, FL 33706
TITLE	S
NAME	HUNTER, ELENA
STREET ADDRESS	3190 W. DE BAZAN AVE
CITY - ST - ZIP	ST PETE BCH, FL 33706
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 607, 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:

Glenn Hunter

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/04 (813) 236-5904

DATE

Business Phone #