

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 753221

**Entity Name:** RAINTREE MANOR HOMES CONDOMINIUM ASSOCIATION NO. 3, INC.**FILED**  
**Apr 14, 2023**  
**Secretary of State**  
**8191774531CC****Current Principal Place of Business:**10500 UNIVERSITY CENTER DR.  
SUITE 190  
TAMPA, FL 33612**Current Mailing Address:**10500 UNIVERSITY CENTER DR.  
SUITE 190  
TAMPA, FL 33612 US**FEI Number: 59-2069818****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**VANGUARD MANAGEMENT GROUP, LLC.  
10500 UNIVERSITY CENTER DR.  
SUITE 190  
TAMPA, FL 33612 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: JANNA WINFIELD****04/14/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                                          |
|-----------------|------------------------------------------|
| Title           | SECRETARY                                |
| Name            | KOCHER, CINDY                            |
| Address         | 10500 UNIVERSITY CENTER DR.<br>SUITE 190 |
| City-State-Zip: | TAMPA FL 33612                           |

|                 |                                          |
|-----------------|------------------------------------------|
| Title           | PRESIDENT                                |
| Name            | JANESICK, VALERIE                        |
| Address         | 10500 UNIVERSITY CENTER DR.<br>SUITE 190 |
| City-State-Zip: | TAMPA FL 33612                           |

|                 |                                          |
|-----------------|------------------------------------------|
| Title           | TREASURER                                |
| Name            | HARWOOD, JEWELL                          |
| Address         | 10500 UNIVERSITY CENTER DR.<br>SUITE 190 |
| City-State-Zip: | TAMPA FL 33612                           |

|                 |                                          |
|-----------------|------------------------------------------|
| Title           | VP                                       |
| Name            | GURTIS, JOHN                             |
| Address         | 10500 UNIVERSITY CENTER DR.<br>SUITE 190 |
| City-State-Zip: | TAMPA FL 33612                           |

|                 |                                          |
|-----------------|------------------------------------------|
| Title           | DIRECTOR                                 |
| Name            | PRADO, JASON                             |
| Address         | 10500 UNIVERSITY CENTER DR.<br>SUITE 190 |
| City-State-Zip: | TAMPA FL 33612                           |

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE: JANESICK , VALERIE****PRESIDENT****04/14/2023**

Electronic Signature of Signing Officer/Director Detail

Date