#### 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16051

Entity Name: RAINTREE PROPERTY OWNERS ASSOCIATION, INC.

FILED
Jan 10, 2018
Secretary of State
CC5055070039

## **Current Principal Place of Business:**

1301 NW 23RD TERR GAINESVILLE. FL 32605

### **Current Mailing Address:**

1301 NW 23 TERRACE GAINESVILLE, FL 32605 FL

FEI Number: 59-2711592 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

BERN, RONALD RTD 1301 NW 23 TERRACE GAINESVILLE, FL 32605 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:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title	TD	Title	PAST PRESIDENT
Name	BERN, RONALD	Name	BLAY, STEVE
Address	1301 NW 23 TERRACE	Address	2445 NW 13 PLACE
City-State-Zip:	GAINESVILLE FL 32605	City-State-Zip:	GAINESVILLE FL 32605

TitleSDTitleDIRECTOR AT LARGENameCATLEDGE, AMYNameCLANTON, PAM

Address 2325 NW 13 PLACE Address 11226 NW 23 TERRACE

City-State-Zip: GAINESVILLE FL 32605 City-State-Zip: GAINESVILLE FL 32605

Title PD Title VPD

Name HELLRUNG, DEE JAY Name BRAM, LESLIE

Address 1130 NW 23 TERRACE Address 1220 NW 23 TERRACE

City-State-Zip: GAINESVILLE FL 32605 City-State-Zip: GAINESVILLE FL 32605

Title DIRECTOR-AT LARGE
Name CENZER, DOUG Name FLANIKEN, CHIPPER
Address 2439 NW 12 PLACE Address 2446 NW 15 PLACE
City-State-Zip: GAINESVILLE FL 32605
City-State-Zip: GAINESVILLE FL 32605

Continues on page 2

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: RONALD BERN TREASURER, DIRECTOR 01/10/2018

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title DIRECTOR AT LARGE

Name PARDO, P. J.

Address 2446 NW 14 PLACE

City-State-Zip: GAINESVILLE FL 32605