

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16051

**FILED**  
**Feb 07, 2014**  
**Secretary of State**  
**CC9821309724**

**Entity Name:** RAIN TREE PROPERTY OWNERS ASSOCIATION, INC.

**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  
Name BERN, RONALD  
Address 1301 NW 23 TERRACE  
City-State-Zip: GAINESVILLE FL 32605

Title PD  
Name NORMAN, MISSY  
Address 2331 NW 13 PLACE  
City-State-Zip: GAINESVILLE FL 32605

Title D  
Name MOYER, SUE  
Address 1225 NW 23 TERACE  
City-State-Zip: GAINESVILLE FL 32605

Title SD  
Name PRIMOSCH, LORIE  
Address 2431 NW 13 PLACE  
City-State-Zip: GAINESVILLE FL 32605

Title D  
Name HELLRUNG, DEE JAY  
Address 1130 NW 23 TERRACE  
City-State-Zip: GAINESVILLE FL 32605

Title VPD  
Name BLAY, STEVE  
Address 2445 NW 13TH PLACE  
City-State-Zip: GAINESVILLE FL 32605

*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** 02/07/2014

Electronic Signature of Signing Officer/Director Detail

Date