

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713873

FILED
Feb 06, 2009
Secretary of State

Entity Name: ST. AUGUSTINE & ST. JOHNS COUNTY BOARD OF REALTORS, INC.

Current Principal Place of Business:

1789 LAKESIDE AVE
ST. AUGUSTINE, FL 32084

New Principal Place of Business:

Current Mailing Address:

1789 LAKESIDE AVE
ST. AUGUSTINE, FL 32084

New Mailing Address:

FEI Number: 59-2024315

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLANCHARD, MARIAN M
1789 LAKESIDE AVE
ST AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MERCURIO, TERESA
Address: 1031 A1A BEACH BLVD.
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: PE () Delete
Name: PACETTI, CHARLES
Address: P.O. BOX 618
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: T () Delete
Name: GOLL, BARBARA
Address: 6045 A1A SOUTH
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: S () Delete
Name: ARRIOLA, IRENE
Address: 88 RIBERA ST.
City-St-Zip: ST AUGUSTINE, FL 32084

Title: D () Delete
Name: HALEY, JOYCE
Address: 3505 US 1 SOUTH
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: D () Delete
Name: MAYS, ROBERT
Address: A1A BEACH BLVD
City-St-Zip: ST. AUGUSTINE, FL 32080

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: MAYS, ROBERT
Address: A1A SOUTH
City-St-Zip: ST. AUGUSTINE, FL 32080

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

Title: D (X) Change () Addition
Name: DELORENZO, ARNOLD
Address: 92 CHARLOTTE STREET
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: D (X) Change () Addition
Name: BARNES, ROY
Address: 2 VALENCIA ST
City-St-Zip: ST. AUGUSTINE, FL 32084

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

SIGNATURE: MARIAN M. BLANCHARD

AE

02/06/2009

Electronic Signature of Signing Officer or Director

Date