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Apr 17 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **721442** (2)
1. Corporation Name
GREATER LAKE COUNTY ASSOCIATION OF REALTORS, INC

Principal Place of Business Mailing Address
725 EAST ALFRED STREET **P.O. BOX 1005**
TAVARES FL 32778 **TAVARES FL 32778-1005**

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip
24 Country 29 Country

3. Date Incorporated or Qualified
07/30/1971
4. FEI Number **59-1627621** Applied For
Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GREATER LAKE CO ASSOC OF REALTORS INC
725 E ALFRED ST
TAVARES FL 32778

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE **BRENDA C. RODGERS, EXECUTIVE VICE PRESIDENT** *Brenda C. Rodgers* DATE **3/12/98**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when retreating)

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	HICKS, TERRY	
STREET ADDRESS	108 LAGRANDE BLVD	
CITY-ST-ZIP	LADY LAKE FL	
TITLE	SD	☐ DELETE
NAME	WILLIAMS, DEBBIE	
STREET ADDRESS	139 US 27 CITRUS TOWER PLAZA	
CITY-ST-ZIP	CLERMONT FL	
TITLE	T/D	☐ DELETE
NAME	KEELER, RALPH	
STREET ADDRESS	18500 HWY 441	
CITY-ST-ZIP	MT. DORA FL	
TITLE	VPD	☐ DELETE
NAME	HUEBNER, ARNOLD D	
STREET ADDRESS	2290 S BAY ST	
CITY-ST-ZIP	EUSTIS FL	
TITLE	PED	☐ DELETE
NAME	PURYEAR, MARVIN	
STREET ADDRESS	350 E HWY 50	
CITY-ST-ZIP	CLERMONT FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	☒ Change ☐ Addition
1.2 NAME	PURYEAR, MARVIN	
1.3 STREET ADDRESS	350 E. HIGHWAY 50	
1.4 CITY-ST-ZIP	CLERMONT, FL 34711	
2.1 TITLE	SD	☒ Change ☐ Addition
2.2 NAME	PERRY, JOYCE	
2.3 STREET ADDRESS	2023 W. OLD HWY 441	
2.4 CITY-ST-ZIP	MOUNT, DORA, FL 32757	
3.1 TITLE	T/D	☒ Change ☐ Addition
3.2 NAME	MENACHO, DOROTHY	
3.3 STREET ADDRESS	2309 W. MAIN STREET	
3.4 CITY-ST-ZIP	LEESBURG, FL 34748	
4.1 TITLE	PED	☒ Change ☐ Addition
4.2 NAME	HUEBNER, ARNOLD "DUKE"	
4.3 STREET ADDRESS	2290 S. BAY STREET	
4.4 CITY-ST-ZIP	EUSTIS, FL 32726	
5.1 TITLE	VP/D	☒ Change ☐ Addition
5.2 NAME	EVANS, WILLIAM	
5.3 STREET ADDRESS	102 W. BURLEIGH BLVD.	
5.4 CITY-ST-ZIP	TAVARES, FL 32778	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **MARVIN PURYEAR, PRESIDENT** *Marvin Puryear* DATE **3/12/98** 352-343-3003

CR2E037 (10/97)