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**Apr 19, 1999 8:00 am**
**Secretary of State**
04-19-1999 90027 027 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT
**1999**

FLORIDA DEPARTMENT OF STATE
**Katherine Harris**
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **721442**

1. Corporation Name
GREATER LAKE COUNTY ASSOCIATION OF REALTORS, INC

* 470991 - 90053 - 4 *

| Principal Place of Business | Mailing Address |
|---|---|
| 725 EAST ALFRED STREET<br>TAVARES FL 32778 | P.O. BOX 1005<br>TAVARES FL 32778-1005 |

| | | |
|---|---|---|
| 2. Principal Place of Business<br>21 | 2a. Mailing Address<br>26 | 3. Date Incorporated or Qualified<br>07/30/1971 |
| Suite, Apt. #, etc.<br>22 | Suite, Apt. #, etc.<br>27 | 4. FEI Number<br>59-1627621 ☐ Applied For ☐ Not Applicable |
| City & State<br>23 | City & State<br>28 | 5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required |
| Zip / Country<br>24 / 25 | Zip / Country<br>29 / 30 | 6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees |

| 9. Name and Address of Current Registered Agent | 10. Name and Address of New Registered Agent |
|---|---|
| GREATER LAKE CO ASSOC OF REALTORS INC<br>725 E ALFRED ST<br>TAVARES FL 32778 | 81 Name: BRENDA C. RODGERS<br>82 Street Address (P.O. Box Number is Not Acceptable): 725 E ALFRED ST.<br>83 City: TAVARES, FL 32778<br>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 BRENDA C RODGERS EVP 4-13-99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

| 12. OFFICERS AND DIRECTORS | | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
|---|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | PD<br>PURYEAR, MARVIN<br>350 E HIGHWAY 50<br>CLERMONT FL 34711 | ☑ DELETE | 1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP | PD<br>HUEBNER, ARNOLD | ☑ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | SD<br>PERRY, JOYCE<br>2023 W OLD HWY 441<br>MOUNT DORA FL 32757 | ☑ DELETE | 2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP | PED<br>EVANS, WILLIAM | ☑ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | T/D<br>MENACHO, DOROTHY<br>2309 W MAIN STREET<br>LEESBURG FL 34748 | ☑ DELETE | 3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP | SD<br>HOTTLE, MARILYN<br>600 N. DONNELLY ST.<br>MT. DORA, FL 32757 | ☐ Change ☑ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | PED<br>HUEBNER, ARNOLD<br>2290 S BAY STREET<br>EUSTIS FL 32726 | ☐ DELETE | 4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP | TD<br>ENIX, ANGELINA<br>102 W. BURLEIGH BLVD<br>TAVARES, FL 32778-2406 | ☐ Change ☑ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VPD<br>EVANS, WILLIAM<br>102 W BURLEIGH BLVD<br>TAVARES FL 32778 | ☐ DELETE | 5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP | VD<br>BONJORN, PAM<br>514 W. HWY. 50<br>CLERMONT, FL 34711 | ☐ Change ☑ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ DELETE | 6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP | | ☐ Change ☐ Addition |

CR2E037 (11/98)

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, with all other like empowered.

**SIGNATURE:** [signature] 4/28/99 352-357-9211
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ARNOLD HUEBNER, PRES., DIRECTOR