FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 7452

(0)

LAKE CITY BOARD OF REALTORS, INC.

FILED								
Feb 05 1998 8:00am								
Secretary of State								

Principal Plac	e of Rusiness	Mailing Address	. .					
214 8. ALACHI	JA STREET	214 S. ALACHUA STREET		Date Incorporated or Qualified				
LAKE CITY FL 32025		LAKE CITY FL 32025 US			12/12/1978			
**		-				4. FEI Number		lied For
0 Ovincinal D	lace of Business	On Molling Address				59-1925395		Applicable
2. Principal P	IBCE OF BUSINESS	2a. Mailing Address				5. Certificate of Status Desired	\$8.75 Ad Fee Req	
Sulte, Apt. #, etc. Suite, Apt. #			#, etc.			6. Election Campaign Financing	\$5.00 Ms	
22	27				Trust Fund Contribution	Added to F		
City & Stat	City & State	State			7. Is this nonprofit corporation a homeowners association?			
Zip	Country	Zip Country				Yes 🔀 No		
24	25 29 30			- ' l		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
27	9. Name and Address of Curren		1901			10. Name and Address of New Registers		
			8	1	Name			
HALEY,	HALEY, WILLIAM J.			2 3	Street Addre	ss (P.O. Box Number is Not Acceptable)	· · · -	
	10 N. COLUMBIA			L				
LAKE C	TfY, FL C 32055		8	13				
			8	4 (City		85 Zip Co	ode
11. Pursuant	to the provisions of Sections 617 050	12 and 617 1508 Florida Statut	as the abo	VA-P	amed corno	pration submits this statement for the purpose	of changing its	registered
l office or r	egistered agent, or both, in the State m familiar with, and accept the obligi	e of Florida. Such change was a	authorized l	bv t∤	ne corporation	on's board of directors. I hereby accept the a	ppointment as re	gistered
	m tamiliar with, and accept the boliga	adons of, Section 617.0503, Fit	orida Statut	95.				
SIGNATURE .	Signature, typed or printed name of registered age	ant and title if applicable. (NOT	E: Registered A	gent i	signature requires	d when reinstating) DATE		
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS	IN 12
TITLE	D	☐ DELETE	1.1 THLE		G	HERNA, DAN , DIRECTOR	Change	Addition
NAME	MCGLAMERY, BARBARA		1.2 NAM		- -	0000 00000 100 000000		
STREET ADDRESS	PO BOX 3303		1.3 STRE			923B SOUTH 1ST STREET		
CITY-ST-ZIP	LAKE CITY FL	□ pricte	1.4 CITY			KE CITY, FL 32025	NEL Obsession	4.249
TITLE	S HELTON CADOL	DELETE	21 TITLE			CRETARY	Change	☐ Addition
NAME	HELTON, CAROL		2.2 NAM			LER, ELIZABETH		
STREET ADDRESS	RT 13, BOX 1154C LAKE CITY FL		2.3 STRE	•		66 WEST DUVAL ST.		
CITY-ST-ZIP	DAKE CHT FL	☐ DELETE	2.4 CITY	_		KE CITY, FL 32055	Change	Addition
TITLE NAME	TOLAR, ELAINE		3.1 TITLE			RESIDENT ELECT	Change (L. AUGINON
1	PO BOX 7246		3.2 NAME			ANCHARD, MARIAN		
STREET ADDRESS	LAKE CITY FL		3.3 STRE		1 4.3	350 US HWY 90 WEST		
CITY-ST-ZIP TITLE	B B	DELETE	3.4. CITY 4.1 TITLE	_	ZIP LIP	KE CITY, FL 32055	Change	Addition
NAME	ROGERS, WALTER		4. 2 NAM				change (
l i	1101 W DUVAL ST				ODECC			
STREET ADDRESS CITY-ST-ZIP	LAKE CITY FL		4.3 STREI					
TITLE	D	DELETE	4.4 CITY - 5.1 TITLE		ır		Change	Addition
NAME	KITE, EVA		5.2 NAME			1000024230		
STREET ADDRESS	RT 13, BOX 845		5.3 STREET		DRESS	-02/06/98010030)46	
CITY-ST-ZIP	LAKE CITY FL		5.4 CITY-		1	***61.25	- , -	
TITLE	D	DELETE	6.1 TITLE			ALL, NANCY , DIRECTOR	Change	Addition
NAME	HERRING, TINKIE DAVIS		6.2 NAME			OUTE 4, BOX 617	うろ	
STREET ADDRESS	RT 13, BOX 1154C		6.3 STREE			OIL 4, BOX OII	din	

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.

6.4 CITY - ST - ZIP

SIGNATURE:

CITY-ST-ZIP

LAKE CITY FL

WALTER L. ROGERS

1-12-98

LAKE CITY, FL 32055

904-752-6575