Mailing Address

STE 302

3200 US 27 SOUTH

SEBRING FL 33870

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **F78349**

1. Corporation Name

Principal Place of Business

SIGNATURE:

3200 US 27 SOUTH

SEBRING FL 33870

STE #302

SEBRING MULTIPLE LISTING SERVICE, INC.

US		US			I)/1982			ļ	
2. Principal P	ace of Business	2a. Mailing Address			4. FEI No			App	lied For	
21	335 5. 2233	26			59-22	205923		Not	Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.						\$8:75 A	dditional	
22		27			5. Certifo	ate of Status Desired		Fee Rec	uired	
City & Stat	e	City & State			6. Electio	n Campaign Financing		\$5.00 h	May Be	
23		28			Trust F	und Contribution		Added to	Fees	
Zip	Country	Zip	Country		8. This co	orporation owes the curn	ent year Intai			
24	25	29 30	<u> </u>			nal Property Tax.			No_	
	9. Name and Address of Current	Registered Agent			10. Name	and Address of New R	legistered A	gent		
		81	81 Name							
MARINE, DEBRA A				82 Street Address (P.O. Box Number is Not Acceptable)						
3200 US 27 SOUTH										
SUITE 302						•				
' SEB	RING FL 33870		84	City				85 Zip C	ode	
			0	City			FL		,	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above	e-named cor	rporation submi	ts this statement for the	purpose of c	hanging its r	egistered	
office or r	egistered agent, or both, in the State o m familiac with, and accept the obligati	if Florida. Such change was auth	orized by	tne corpora	tion's board of o	directors. I hereby accep	t the appoint	iment as reg	istered	
	And accept the congati	7 7 100		Λ		Cran time	1	- ez .99		
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE, Re	egistered Agen	t signature requi	PC A BA	o Cxecutive	DATE	<u> </u>		
12.	OFFICERS AND		13.		ADDITIO	ONS/CHANGES TO OF	FICERS AND	DIRECTOR	RS IN 12	
TITLE	Р	☐ DELETE	1.1 TITLE	7	>			Change	Addition	
NAME	MARABEL, STEVE	Ī	1.2 NAME	~	Nara Bel	Steve IONZA Dr.				
STREET ADDRESS	3602 MONZA DR		1.3 STREET	ADDRESS 3	3602 M	IONZA Dr.				
	SEBRING FL 33872		1.4 CITY-ST			9,71 3387	ર			
CITY-ST-ZIP	PE PE	☐ DELETE	2.1 TITLE	7)	1		Change	☐ Addition	
NAME	FRICKER, LOWELL J JR	·	2.2 NAME	1	taicker.	Lowell J S	سبع	-		
STREET ADDRESS	2523 US 27 SOUTH		2.3 STREET			15 27 South				
	AVON PARK FL 33825		2. 4 CITY- S	T. 7IP	AUDNO PE	ack 71 33	ริสร์			
CITY-ST-ZIP	VP	DELETE	3.1 TITLE	1-211	² 2	7172 11 9 9	<u> </u>	Change	☐ Addition	
	OTTERMAN, TERRI		3.2 NAME		otterm a	o Torri				
NAME	2617 US 27 SOUTH		3.3 STREET			5 27 South				
STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·		E	T 710	50114	71 33870	•			
CITY-ST-ZIP	SEBRING FL 33870	DELETE	3.4. CITY-S 4.1 TITLE	1-215	10	1-71 33373		Change	Addition	
TITLE	D CARTER REPRY W	, DELETE	4,1 MILE 4,2 NAME		0.14	n m ' = 90			/-	
NAME	CARTER, PERRY W			ADODESS	100 KA U	oring 27 Obth				
STREET ADDRESS	1911 FLOWER TERR		4.3 STREET		ze Bring		1			
CITY-ST-ZIP	SEBRING FL 33872	☐ DELETE	4.4 CITY-S' 5.1 TITLE	1-217	200 1 NO	7 1 3 3 6 7 1		Change	Addition	
TITLE	AE MADINE DEDDA A	ال المددداد	5.1 MILE 5.2 NAME			** · · · · · · · · · · · · · · · · · ·		g-		
NAME	MARINE, DEBRA A		5.3 STREET	ADDRESS		•				
STREET ADDRESS	3200 US 27 SOUTH		5.4 CITY-S	1						
CITY-ST-ZIP	SEBRING FL 33870	∑ DELETE	6.1 TITLE					Change	Addition (
TITLE	DENTON DODIC	DELETE:	6.2 NAME		Tana -	Donohue		_ 5390	,	
NAME	DENTON, DORIS		1	ADDOCCO	235 US	on IL-+				
STREET ADORESS	363 US 27 SOUTH		6.3 STREET				\sim		•	
CITY-ST-ZIP	SEBRING FL 33870	0 - 20 - 1	6.4 CITY-S	1-ZIP 5	5eBring	<u> </u>	L further cont	fu that the in	formation	
indiantad	certify that the information supplied with on this annual report or supplemental	annual report is true and accurat	te and that	t mv sinnati	ire shall have tr	ne same legal effect as l	r made unde	roam: maci	aman	
officer or	director of the corporation or the receive	ver or trustee empowered to exec	cute this r	epoπ as req	uired by Chapt	er 607, Florida Statutes	and that my	name appe	ars in	
Block 12	or Block 13 if changed, or on an attach	intene with an auditess with all at	naeraike er	npowered.				-		

INTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Feb 23, 1999 8:00 am Secretary of State

02-23-1999 90058 015 ***150.00



DO NOT WRITE IN THIS SPACE