2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003619

FILED Feb 23, 2007 Secretary of State

Entity Name: PINELLAS SUNCOAST ASSOCIATION OF REALTORS, INC.

US

Current Principal Place of Business: New Principal Place of Business:

4590 ULMERTON ROAD CLEARWATER, FL 33762

Current Mailing Address: New Mailing Address:

4590 ULMERTON ROAD

CLEARWATER, FL 33762 US

FEI Number: 59-3719555 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GUIBERSON, ANN 4590 ULMERTON ROAD CLEARWATER, FL 33762 US

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:

Name:

Electronic Signature of Registered Agent

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

() Delete

Title: CH (X) Change () Addition

ROGERS, PHILIP Name: KLING, CAROLYN

Address: 3090 CHARLES AVENUE Address: 1120 PINELLAS BAYWAY #109
City-St-Zip: CLEARWATER, FL 33761 City-St-Zip: TIERRA VERDE, FL 33715

Title: CHE () Delete Title: CHE (X) Change () Addition

Name: KLING, CAROLYN Name: EDWARDS, DAVID

 Address:
 1120 PINELLAS BAYWAY #109
 Address:
 483 MANDALAY AVE STE 201

 City-St-Zip:
 TIERRA VERDE, FL 33715
 City-St-Zip:
 CLEARWATER, FL 33767

Title: SD () Delete Title: SD (X) Change () Addition Name: EDWARDS, DAVID Name: WOLFE, PA, BARBARA

Address: 2560 TAMPA ROAD Address: 4175 WOODLANDS PARKWAY
City-St-Zip: PALM HARBOR, FL 34684 City-St-Zip: PALM HARBOR, FL 34685

Title: TD () Delete Title: TD (X) Change () Addition

 Name:
 ADAMO, VICTÓR
 Name:
 SMITH, HEATHÉR

 Address:
 8486 SEMINOLE BLVD
 Address:
 3000 66TH ST N

City-St-Zip: SEMINOLE, FL 33772 City-St-Zip: ST. PETERSBURG, FL 33710

I hereby certify that the information supplied with this filing does not qualify for the 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: ANN GUIBERSON PRES 02/23/2007