2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 22, 2008
Secretary of State

DOCUMENT# N98000001861

Entity Name: SOUTH FLORIDA BOARD OF REALTISTS, INC.

Current Principal Place of Business:

610 NW 183RD ST
SUITE 206
MIAMI GARDENS, FL 33169

New Principal Place of Business:

Current Mailing Address:

610 NW 183RD ST
SUITE 206
MIAMI GARDENS, FL 33169

New Mailing Address:

FEI Number: 65-0244264 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ROSE, MINCEY
610 NW 183RD ST SUITE 206
MIAMI GARDENS, FL 33169 US

Name and Address of New Registered Agent:

SJO ASSOCIATES
15260 SW 280 ST SUITE 206A
HOMESTEAD, FL 33032 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: STEPHANYE JOHNSON 05/22/2008
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BISHOP, CHESTER
Address: 610 NW 183RD ST SUITE 206
City-St-Zip: MIAMI, FL 33169

Title: VD ( ) Delete
Name: FELTON, DANNY
Address: 600 NW 183RD STREET
City-St-Zip: MIAMI, FL 33169

Title: TD ( ) Delete
Name: JOHNSON, IROSE
Address: 610 NW 183RD ST SUITE 206
City-St-Zip: MIAMI, FL 33169

Title: S ( ) Delete
Name: MINCEY, ROSE
Address: 610 NW 183RD ST SUITE 206
City-St-Zip: MIAMI, FL 33169

Title: VP ( ) Delete
Name: ANDERSON, GAILA
Address: 610 NW 183RD ST SUITE 206
City-St-Zip: MIAMI, FL 33169

Title: S ( ) Delete
Name: CASON, WILBERT
Address: 610 NW 183RD ST SUITE 206
City-St-Zip: MIAMI, FL 33169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: CHESTER BISHOP PRES 05/22/2008
Electronic Signature of Signing Officer or Director — Date