

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 609332

FILED
Jan 14, 2005
Secretary of State

Entity Name: NORTH FLORIDA MULTIPLE LISTING SERVICE, INC.

Current Principal Place of Business:

236 S ALACHUA AVE
LAKE CITY, FL 32025 US

New Principal Place of Business:

Current Mailing Address:

236 S ALACHUA AVE
LAKE CITY, FL 32025 US

New Mailing Address:

FEI Number: 59-1904568

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GHERNA, DAN L
236 SW ALACHUA AVE.
LAKE CITY, FL 32025 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: LUNDE, BLAKE
Address: 3101 W. US HWY 90 SUITE 101
City-St-Zip: LAKE CITY, FL 32055

Title: D () Delete
Name: SHIRAH, KELLIE
Address: 123 E HOWARD ST
City-St-Zip: LIVE OAK, FL 32060

Title: D () Delete
Name: CRAPPS, DANIEL
Address: 2806 W US HWY 90
City-St-Zip: LAKE CITY, FL 32055

Title: S () Delete
Name: BRETT, DEUTSCH
Address: 123 E HOWARD ST
City-St-Zip: LIVE OAK, FL 32064

Title: D () Delete
Name: BATTEN, STAN
Address: PO BOX 1734
City-St-Zip: LAKE CITY, FL 32056

Title: P () Delete
Name: TYLER, ELIZABETH
Address: 540 W DUVAL STREET
City-St-Zip: LAKE CITY, FL 32055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LUNDE, BLAKE
Address: 3101 W. US HWY 90 SUITE 101
City-St-Zip: LAKE CITY, FL 32055

Title: D (X) Change () Addition
Name: VANACORE, LISA
Address: 944 SW BAYA DR.
City-St-Zip: LAKE CITY, FL 32055

Title: D (X) Change () Addition
Name: AMRHEIN, JOANNA
Address: 379 W. DUVAL
City-St-Zip: LAKE CITY, FL 32055

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

Title: VP (X) Change () Addition
Name: VAN ARSDALL, JEANNE
Address: 4411 SW VAN ARSDALL GLEN
City-St-Zip: LAKE CITY, FL 32024

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELIZABETH TYLER

P

01/14/2005

Electronic Signature of Signing Officer or Director

Date