2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005829

FILED Apr 25, 2008 Secretary of State

Entity Name: BUSINESS BROKERS OF FLORIDA - MLS, INC.

Current Principal Place of Business: New Principal Place of Business: 513 N BELCHER RD CLEARWATER, FL 33765 **Current Mailing Address: New Mailing Address:** 513 N BELCHER RD CLEARWATER, FL 33765 FEI Number: 59-3638168 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: MOORE, STEVEN W 8200 BRYAN DAIRY ROAD SUITE 300 LARGO, FL 33777 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition MURPHY, ROGER Name: Name: 2196 MAIN STREET, SUITE E Address: Address: City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: Title: () Delete Title: D (X) Change () Addition RAPTOULIS, STEVE Name: JOHN, SERB Name: Address: P.O. BOX 14056 Address: 4613 PECOS CT. City-St-Zip: CLEARWATER, FL 33766 City-St-Zip: JACKSONVILLE, FL 32259 Title: () Delete Title: () Change () Addition STEBBINS, KENNETH Name: Name: 8411 W. OAKLAND BLVD., #202 Address: Address: City-St-Zip: FT. LAUDERDALE, FL 33351 City-St-Zip: Title: () Delete Title: () Change () Addition CAGNETTA, ANDREW Name: Name: Address: 54200 NW 21ST TERR Address: City-St-Zip: FORT LAUDERDALE, FL 33309 City-St-Zip: Title: () Delete Title: () Change () Addition RISDON, BERT Name: Name: 378 CENTER POINT CIRCLE, #1238 Address: Address: City-St-Zip: ALTAMONTE SPRINGS, FL 32701 City-St-Zip: Title: () Delete Title: () Change () Addition COFIELD, JERRY Name: Name: Address: 9970 BAYMEADOWS RD #103 Address: JACKSONVILLE, FL 32256 City-St-Zip: 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: KENNETH STEBBINS TD 04/25/2008