

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713873

Entity Name: ST. AUGUSTINE & ST. JOHNS COUNTY BOARD OF REALTORS, INC.**FILED**
Apr 25, 2024
Secretary of State
6174697524CC**Current Principal Place of Business:**1789 LAKESIDE AVE
ST. AUGUSTINE, FL 32084**Current Mailing Address:**1789 LAKESIDE AVE
ST. AUGUSTINE, FL 32084**FEI Number: 59-2024315****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**RAYMOS, VICTOR J
1789 LAKESIDE AVE
ST AUGUSTINE, FL 32084 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

Officer/Director Detail :

Title PAST PRESIDENT

Name BYRD, LENNY

Address 1789 LAKESIDE AVE

City-State-Zip: ST. AUGUSTINE FL 32084

Title PRESIDENT ELECT

Name FRASER, DANIELLE

Address 1789 LAKESIDE AVE

City-State-Zip: ST. AUGUSTINE FL 32084

Title PRESIDENT

Name LANG, DANIEL

Address 1789 LAKESIDE AVE

City-State-Zip: ST. AUGUSTINE FL 32084

Title DIRECTOR, EX-OFFICIO,
ASSOCIATION EXECUTIVE/CEO

Name RAYMOS, VICTOR J

Address 1789 LAKESIDE AVE

City-State-Zip: ST. AUGUSTINE FL 32084

Title DIRECTOR

Name DEAN, MELANIE

Address 1789 LAKESIDE AVE

City-State-Zip: ST. AUGUSTINE FL 32084

Title DIRECTOR

Name O'NEILL, SHAWN

Address 1789 LAKESIDE AVE

City-State-Zip: ST. AUGUSTINE FL 32084

Title DIRECTOR

Name MAGUIRE, ROBERT

Address 1789 LAKESIDE AVE

City-State-Zip: ST. AUGUSTINE FL 32084

Title TREASURER

Name BIRCHALL, ANDREW

Address 1789 LAKESIDE AVE

City-State-Zip: ST. AUGUSTINE FL 32084

Continues on page 2

I hereby 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 all other like empowered.

SIGNATURE: LANG, DANIEL**PRESIDENT****04/25/2024**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SECRETARY
Name WALT, STEVE
Address 1789 LAKESIDE AVE
City-State-Zip: ST. AUGUSTINE FL 32084

Title DIRECTOR
Name WHITTINGTON, ROBERT
Address 1789 LAKESIDE AVE
City-State-Zip: ST. AUGUSTINE FL 32084

Title EX-OFFICIO
Name JOHNSON, GENE
Address 1789 LAKESIDE AVE
City-State-Zip: ST. AUGUSTINE FL 32084

Title DIRECTOR
Name ODOM, ROBERTA
Address 1789 LAKESIDE AVE
City-State-Zip: ST. AUGUSTINE FL 32084

Title DIRECTOR
Name DELEO, KATIE
Address 1789 LAKESIDE AVE
City-State-Zip: ST. AUGUSTINE FL 32084