#### **2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 733094** 

Entity Name: WEST PASCO BOARD OF REALTORS, INC.

FILED
Jan 11, 2021
Secretary of State
3356493046CC

# **Current Principal Place of Business:**

5409 SUNSET ROAD

NEW PORT RICHEY, FL 34652

### **Current Mailing Address:**

5409 SUNSET ROAD

NEW PORT RICHEY. FL 34652

FEI Number: 59-1650514 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

MISEMER, KEN 5645 NEBRASKA AVE NEW PORT RICHEY, FL 34652 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	CEO	Title	PRESIDENT
Name	COPELAND, SAMMIE	Name	BARRETT, SCOTT
Address	5409 SUNSET RD	Address	5409 SUNSET ROAD

City-State-Zip: NEW PORT RICHEY FL 34652 City-State-Zip: NEW PORT RICHEY FL 34652

TitleDIRECTORTitlePAST PRESIDENTNameELDERT, TANYANameGALLO, MIKE

Address 5409 SUNSET ROAD Address 5409 SUNSET ROAD

City-State-Zip: NEW PORT RICHEY FL 34652 City-State-Zip: NEW PORT RICHEY FL 34652

TitleDIRECTORTitlePRESIDENTNameLABBANCZ, WILLIAMNameGALLO, MIKEAddress5409 SUNSET ROADAddress5409 SUNSET RD.

City-State-Zip: NEW PORT RICHEY FL 34652 City-State-Zip: NEW PORT RICHEY FL

Title SECRETARY Title PRESIDENT ELECT

Name TAYLOR, ALICE Name BUNDY, MIKE

Address 5409 SUNSET ROAD Address 5409 SUNSET ROAD

City-State-Zip: NEW PORT RICHEY FL 34652 City-State-Zip: NEW PORT RICHEY FL 34652

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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: SAMMIE COPELAND EXECUTIV

Electronic Signature of Signing Officer/Director Detail

EXECUTIVE OFFICER 01/11/2021

Date

## Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

NameWALLACE, JIMNameSCHMIDT, JESSICAAddress5409 SUNSET ROADAddress5409 SUNSET ROAD

City-State-Zip: NEW PORT RICHEY FL 34652 City-State-Zip: NEW PORT RICHEY FL 34652

TitleDIRECTORTitleTREASURERNameKINNARD, CAROLNameLUCCO, CONNIEAddress5409 SUNSET ROADAddress5409 SUNSET ROAD

City-State-Zip: NEW PORT RICHEY FL 34652 City-State-Zip: NEW PORT RICHEY FL 34652