

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734425

Entity Name: CENTRAL PASCO BOARD OF REALTORS, INC.

Current Principal Place of Business:

24812 STATE ROAD 54
LUTZ, FL 33559

Current Mailing Address:

24812 STATE ROAD 54
LUTZ, FL 33559 US

FEI Number: 59-1850585

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GONZALEZ HALE, MERCEDES
26907 FOGGY CREEK RD
SUITE 101
WESLEY CHAPEL, FL 33544 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: MERCEDES GONZALEZ HALE

04/28/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name MCDONALD, DWIGHT
Address 5406 LINDBERG ST
City-State-Zip: RIVERVIEW FL 33578

Title PRESIDENT ELECT
Name JONAS, ADAM
Address 23246 CHELSEA LOOP
City-State-Zip: LAND O LAKES FL 34639

Title SECRETARY
Name RICHARDSON, LOUISE
Address 21032 PICASSO CT UNIT K 103
City-State-Zip: LAND O LAKES FL 34637

Title VICE-PRESIDENT
Name RUNDEL, PETE
Address 8539 WINSOME WAY
City-State-Zip: LAND O LAKES FL 34637

Title TREASURER
Name CHEN, DAVID
Address 4440 WINDING RIVER DRIVE
City-State-Zip: VALRICO FL 33596

Title DIRECTOR
Name KIER, LARS
Address 19913 TAMIAMI AVE.
City-State-Zip: TAMPA FL 33647

Title DIRECTOR
Name SIMPSON, MONICA
Address 3053 HARVEST MOON DR
City-State-Zip: PALM HARBOR FL 34683

Title DIRECTOR
Name CATTERTON, DEBORAH
Address 1435 OBEAR CT
City-State-Zip: LAND O'LAKES FL 34637

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: ADAM JONAS

P

04/28/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title PAST PRESIDENT
Name MOONEY, LYNN
Address 2024 PEBBLE BEACH BLVD
City-State-Zip: SUN CITY CENTER FL 33573

Title DIRECTOR
Name ROJAS, CARLOS(TONY)
Address PO BOX 273213
City-State-Zip: TAMPA FL 33688