1621 CROYDO ORLANDO, FL	-			
Current Mai	ling Address:			
PO BOX 618 ORLANDO,	3001 FL 32861 US			
FEI Number: 46-5487502		Certificate of Status Desired: Yes		
Name and A	Address of Current Registered Agent:			
WEATHERSPO 310 PLANTATIO DEBARY, FL 3	ON CLUB DR			
The above name	d entity submits this statement for the purpose of changing its regi	stered office or regis	tered agent, or both, in the State of Fl	lorida.
SIGNATURE: EUGENE WEATHERSPOON				
SIGNATURE	EUGENE WEATHERSPOON			03/13/2024
SIGNATURE	EUGENE WEATHERSPOON Electronic Signature of Registered Agent			03/13/2024 Date
SIGNATURE Officer/Dire	Electronic Signature of Registered Agent			
	Electronic Signature of Registered Agent	Title	CHAIRMAN	
Officer/Dire	Electronic Signature of Registered Agent	Title Name	CHAIRMAN GIPSON, JAMES	
Officer/Dire Title	Electronic Signature of Registered Agent ctor Detail : PRESIDENT		••••	
Officer/Dire Title Name	Electronic Signature of Registered Agent ctor Detail : PRESIDENT BOLDEN, RONDRA	Name Address	GIPSON, JAMES	
Officer/Dire Title Name Address	Electronic Signature of Registered Agent ctor Detail : PRESIDENT BOLDEN, RONDRA 1621 CROYDON STREET	Name Address	GIPSON, JAMES 4263 PINEBARK AVENUE	
Officer/Dire Title Name Address City-State-Zip:	Electronic Signature of Registered Agent ctor Detail : PRESIDENT BOLDEN, RONDRA 1621 CROYDON STREET ORLANDO FL 32828	Name Address	GIPSON, JAMES 4263 PINEBARK AVENUE	
Officer/Dire Title Name Address City-State-Zip: Title	Electronic Signature of Registered Agent ctor Detail : PRESIDENT BOLDEN, RONDRA 1621 CROYDON STREET ORLANDO FL 32828 TREASURER	Name Address	GIPSON, JAMES 4263 PINEBARK AVENUE	

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: METRO ORLANDO ASSOCIATION OF REALTISTS INC.

DOCUMENT# N14000004197

Current Principal Place of Business:

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.

TREASURER

SIGNATURE: EUGENE WEATHERSPOON

03/13/2024 Date