2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 311121

FILED Jan 03, 2012 Secretary of State

Entity Name: ST AUGUSTINE & ST JOHNS COUNTY MULTIPLE LISTING SERVICE, INC.

Current Principal Place of Business: New Principal Place of Business:

1789 LAKESIDE AVENUE SAINT AUGUSTINE, FL 32084

Current Mailing Address: New Mailing Address:

1789 LAKESIDE AVENUE SAINT AUGUSTINE, FL 32084

FEI Number: 59-1155676 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RAYMOS, VICTOR J 1789 LAKESIDE AVENUE 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

OFFICERS AND DIRECTORS:

Title: 5

 Name:
 WEST, ROBERT

 Address:
 1789 LAKESIDE AVENUE

 City-St-Zip:
 ST AUGUSTINE, FL 32084

Title: F

Name: SCHROEDER, DIRK
Address: 1789 LAKESIDE AVENUE
City-St-Zip: ST AUGUSTINE, FL 32084

Title: T

 Name:
 EDMONSON, IAN

 Address:
 1789 LAKESIDE AVENUE

 City-St-Zip:
 ST AUGUSTINE, FL 32084

Title: PE

Name: DELANEY, KATHERINE
Address: 1789 LAKESIDE AVENUE
City-St-Zip: ST AUGUSTINE, FL 32084

Title:

Name: BARRY, RON

Address: 1789 LAKESIDE AVENUE City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: [

 Name:
 SILBERBERG, PAULA

 Address:
 1789 LAKESIDE AVENUE

 City-St-Zip:
 SAINT AUGUSTINE, FL 32084

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: VICTOR J. RAYMOS AE 01/03/2012