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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 405667 NORTH BREVARD MULTIPLE LISTING SERVICE, INC. Principal Place of Business Mailing Address

FILED Apr 20 1998 8:00am Secretary of State

2701 GARDEN ST 115 S LEMON AVE TITUSVILLE FL 32796 TITUSVILLE FL 32796 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/26/1972 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-1414702 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Žφ Country Country Zio 8. This corporation owes or has paid the current year Intangible 24 29 Personal Property Tax due June 30. Yes 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MESSER, SANDRA 4795 FAY BLVD 82 Street Address (P.O. Box Number is Not Acceptable) COCOA FL 32927 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TIFLE Change Addition SHAFER, LORENE 1.2 NAME NAME 2001 S. WASHINGTON AVE. STREET ADDRESS 1.3 STREET ADDRESS TITUSVILLE FL CITY-ST-ZIP 1.4 CiTY-ST-ZiP DELETE Change Addition 21 TIFLE TITLE MESSER, SANDRA NAME 2.2 NAME 4795 FAY BLVD STREET ADDRESS 2.3 STREET ADDRESS **COCOA FL** CITY-ST-ZIP 2. 4 CITY - ST-ZIP DELETE Change Addition TITLE 31 TITLE BECK, TED 3.2 NAME NAME 310 CHENEY HWY 3.3 STREET ADDRESS STREET ADDRESS TITUSVILLE FL 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TITLE CONNER, PATRICK NAME 4. 2 NAME **840 GARDEN STREET** STREET ADDRESS 4.3 STREET ADDRESS TITUSVILLE FL 4.4 CITY-ST-ZIP CITY-ST-ZIP DELFTE Change Addition 51 TITLE TITLE SHAFFNER, PAMELA 52 NAME NAME 310 CHENEY HWY 5 3 STREET ADDRESS STREET ADDRESS TITUSVILLE FL 5.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change 6.1 TITLE Addition TITLE SOLOMON, SHIRLEY 6.2 NAME NAME 2222 S WASHINGTON AVE 6.3 STREET ADDRESS STREET ADDRESS TITUSVILLE FL CITY-ST-ZIP 14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information

indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed on an attachment with an address

SIGNATURE: