

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 506608

FILED  
Jan 24, 2008  
Secretary of State

Entity Name: CAPE CORAL MULTIPLE LISTING SERVICE, INC.

## Current Principal Place of Business:

918 SE 46TH LANE  
CAPE CORAL, FL 33904 US

## New Principal Place of Business:

## Current Mailing Address:

918 SE 46TH LANE  
CAPE CORAL, FL 33904 US

## New Mailing Address:

FEI Number: 59-1713156      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MASON, KAREN M  
918 SE 46TH LANE  
CAPE CORAL, FL 33904 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MILOFF, JEFF  
Address: 4707 SE 9TH PL.  
City-St-Zip: CAPE CORAL, FL 33904

Title: TD ( ) Delete  
Name: DUNN, CAROLINE  
Address: 3323 N KEY DR., SUITE D-3  
City-St-Zip: FT. MYERS, FL 33903

Title: SE ( ) Delete  
Name: COUNTS, WILLIAM  
Address: 814 PINE ISLAND RD  
City-St-Zip: CAPE CORAL, FL 33991

Title: PE ( ) Delete  
Name: LEE, THOMAS J  
Address: 831 CAPE CORAL PKWY EAST  
City-St-Zip: CAPE CORAL, FL 33904

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LEE, THOMAS J  
Address: 831 CAPE CORAL PKWY EAST  
City-St-Zip: CAPE CORAL, FL 33904

Title: TD (X) Change ( ) Addition  
Name: HEISLER, DON  
Address: 808 SE 46TH LANE  
City-St-Zip: CAPE CORAL, FL 33904

Title: SE (X) Change ( ) Addition  
Name: DUNN, CAROLINE  
Address: 3323 N KEY DR., SUITE D-3  
City-St-Zip: FT. MYERS, FL 33903

Title: PE (X) Change ( ) Addition  
Name: HELLENBRAND, PAULA  
Address: 4430 ORCHID BOULEVARD  
City-St-Zip: CAPE CORAL, FL 33904

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: THOMAS J. LEE

MR

01/24/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date