

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 517421 (4)

1. Corporation Name

EAST PASCO MULTIPLE LISTING SERVICE, INC.



Principal Place of Business

5026 7TH STREET  
ZEPHYRHILLS FL 33540  
US

Mailing Address

5026-7TH ST.  
ZEPHYRHILLS FL 33540  
US

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

BREWER, KATHERINE M.  
5801 GALL BLVD  
ZEPHYRHILLS FL 33541

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent's signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY- ST- ZIP

P  
BREWER, KATHERINE M.  
5801 GALL BLVD  
ZEPHYRHILLS, FL 00000

TITLE NAME STREET ADDRESS CITY- ST- ZIP

S  
SANDERS, SUSAN  
5810 6TH ST  
ZEPHYRHILLS, FL 00000

TITLE NAME STREET ADDRESS CITY- ST- ZIP

T  
LEACH, NORMAN  
37422 HWY. 54 W.  
ZEPHYRHILLS, FL 00000

TITLE NAME STREET ADDRESS CITY- ST- ZIP

VP  
HAUFF, LINDA  
614 S. 7TH ST.  
DADE CITY FL

TITLE NAME STREET ADDRESS CITY- ST- ZIP

TITLE NAME STREET ADDRESS CITY- ST- ZIP

TITLE NAME STREET ADDRESS CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13. 1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY- ST- ZIP

P  
LEACH, Norman  
37422 SR 54 West  
Zephyrhills, FL 33541

2. TITLE 3. NAME 4. STREET ADDRESS 5. CITY- ST- ZIP

VP  
NASH, Rachel  
4947 Coats Road  
Zephyrhills, FL 33541

3. TITLE 4. NAME 5. STREET ADDRESS 6. CITY- ST- ZIP

S  
COLE, Jo  
6724 Gall B.vd.  
Zephyrhills, FL 33541

4. TITLE 5. NAME 6. STREET ADDRESS 7. CITY- ST- ZIP

T  
REUTIMAN, Linda  
7335 Gall Blvd.  
Zephyrhills, FL 33541

5. TITLE 6. NAME 7. STREET ADDRESS 8. CITY- ST- ZIP

5. TITLE 6. NAME 7. STREET ADDRESS 8. CITY- ST- ZIP

6. TITLE 7. NAME 8. STREET ADDRESS 9. CITY- ST- ZIP

6. TITLE 7. NAME 8. STREET ADDRESS 9. CITY- ST- ZIP

3/18/96

813-782-7971

CR2E034 (12/95)