

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 09 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

Mailing Address

5026 7TH STREET
ZEPHYRHILLS FL 33540
US

5026-7TH ST.
ZEPHYRHILLS FL 33540-5132
US



3. Date Incorporated or Qualified
10/28/1976

3a. Date of Last Report
03/25/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt #, etc.

Suite, Apt #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-1755413

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New 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 signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☒ DELETE
NAME LEACH, NORMAN
STREET ADDRESS 37422 SR 54 WEST
CITY- ST- ZIP ZEPHYRHILLS, FL 00000

1.1 TITLE President ☒ Change ☐ Addition
1.2 NAME Owens-Shannon, Roxann
1.3 STREET ADDRESS 5710 Gall Blvd.
1.4 CITY- ST- ZIP Zephyrhills, FL 33541

TITLE VP ☒ DELETE
NAME NASH, RACHEL
STREET ADDRESS 4947 COATS ROAD
CITY- ST- ZIP ZEPHYRHILLS, FL 00000

2.1 TITLE Treasurer ☒ Change ☐ Addition
2.2 NAME Brewer, Katherine M.
2.3 STREET ADDRESS 5801 Gall Blvd.
2.4 CITY- ST- ZIP Zephyrhills, FL 33541

TITLE S ☐ DELETE
NAME COLE, JO
STREET ADDRESS 6724 GALL BLVD.
CITY- ST- ZIP ZEPHYRHILLS, FL 00000

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

TITLE T ☐ DELETE
NAME REUTIMAN, LINDA
STREET ADDRESS 7335 GALL BLVD.
CITY- ST- ZIP ZEPHYRHILLS FL

4.1 TITLE Vice President ☒ Change ☐ Addition
4.2 NAME Reutiman, Linda
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

14. I do hereby 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, or on an attachment with an address.

SIGNATURE:

Katherine M. Brewer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3-31-97

Daytime Phone #

813-788-7608

CR2E034 (9/96)