

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 587413

FILED
Jan 07, 2005
Secretary of State

Entity Name: MULTIPLE LISTING SERVICE OF BONITA SPRINGS - ESTERO, INC.

Current Principal Place of Business:

27313 OLD 41 ROAD SE
BONITA SPRINGS, FL 34135 US

New Principal Place of Business:

Current Mailing Address:

27313 OLD 41 ROAD SE
BONITA SPRINGS, FL 34135 US

New Mailing Address:

FEI Number: 59-1874712 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHUMANN, RAY
27200 RIVERVIEW CENTER BLVD.
SUITE 703
BONITA SPRINGS, FL 34135 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: MGR () Delete
Name: CAMERON, PAINE
Address: 27313 OLD 41 RD SE
City-St-Zip: BONITA SPRINGS, FL 34135

Title: DP () Delete
Name: CHRISTENSEN, BETTY JEAN
Address: 27313 OLD 41 RD SE
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VD () Delete
Name: SCHMIDT, ROBERT
Address: 27313 OLD 41 RD SE
City-St-Zip: BONITA SPRINGS, FL 34135

Title: SD () Delete
Name: HOOK, PENNY
Address: 27313 OLD 41 RD SE
City-St-Zip: BONITA SPRINGS, FL 34135

Title: TD () Delete
Name: ZANT, RUDY
Address: 27313 OLD 41 SE
City-St-Zip: BONITA SPRINGS, FL 34135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DP (X) Change () Addition
Name: SCHMIDT, ROBERT
Address: 27313 OLD 41 RD SE
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VD (X) Change () Addition
Name: BRODERSEN, WES
Address: 27313 OLD 41 RD SE
City-St-Zip: BONITA SPRINGS, FL 34135

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CAMERON PAINE

Electronic Signature of Signing Officer or Director

MR.

01/07/2005

Date