

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704403

FILED  
Jan 07, 2008  
Secretary of State

**Entity Name:** PENSACOLA ASSOCIATION OF REALTORS, INC.

**Current Principal Place of Business:**

107 WEST MAIN STREET  
PENSACOLA, FL 32502

**New Principal Place of Business:**

**Current Mailing Address:**

107 WEST MAIN STREET  
PENSACOLA, FL 32502

**New Mailing Address:**

**FEI Number:** 59-0682788

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MICHAELS, CHARLES A  
107 WEST MAIN STREET  
PENSACOLA, FL 32502 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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: GOOCH, EUGENE D  
Address: 8445 PENSACOLA BLVD  
City-St-Zip: PENSACOLA, FL 32534

Title: PED ( ) Delete  
Name: TOEPFER, DIANE T  
Address: 4595 OLD SPANISH TRAIL  
City-St-Zip: PENSACOLA, FL 32504

Title: STD ( ) Delete  
Name: MITCHELL, LINDA  
Address: 7203 PINE FOREST ROAD  
City-St-Zip: PENSACOLA, FL 32526

Title: EO ( ) Delete  
Name: MICHAELS, CHARLES  
Address: 107 WEST MAIN STREET  
City-St-Zip: PENSACOLA, FL 32502

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: TOEPFER, DIANE T  
Address: 4595 OLD SPANISH TRAIL  
City-St-Zip: PENSACOLA, FL 32504

Title: PED (X) Change ( ) Addition  
Name: WEINER, MARTHA  
Address: 4531 WHISPER WAY  
City-St-Zip: PENSACOLA, FL 32504

Title: STD (X) Change ( ) Addition  
Name: HILLARD, DARLINE  
Address: 13587 PERDIDO KEY DR  
City-St-Zip: PENSACOLA, FL 32507

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES A. MICHAELS

EO

01/07/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date