FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 MAY 31 PM 2:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 704474 (6)

1. Corporation Name
GREATER ORLANDO ASSOCIATION OF REALTORS, INC.

Principal Place of Business	Mailing Address
621 E. CENTRAL BLVD. P.O. BOX 587 ORLANDO FL 32802	621 E. CENTRAL BLVD. P.O. BOX 587 ORLANDO FL 32802

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/27/1962
3a. Date of Last Report: 02/28/1994
4. FEI Number: 59-0859806 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $68.75 Supplemental Fee Not Required
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
JENNINGS, BELTON E., III 621 E. CENTRAL BLVD. ORLANDO FL 32802	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] Belton E. Jennings III, Exec. V.P. 2/6/95
(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	PP	1.1 TITLE	PE	☒ Change ☐ Addition
NAME	WILLIAMS, GARY	1.2 NAME	Meeks, Jack	
STREET ADDRESS	211 E. COLONIAL DRIVE	1.3 STREET ADDRESS	460 E. Semoran Blvd.	
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	Casselberry, FL 32707	
TITLE	PE	2.1 TITLE	PD	☒ Change ☐ Addition
NAME	GUINN, JERRY	2.2 NAME	Guinn, Jerry	
STREET ADDRESS	211 E. COLONIAL DRIVE	2.3 STREET ADDRESS	211 E. Colonial Drive	
CITY-ST-ZIP	ORLANDO FL	2.4 CITY-ST-ZIP	Orlando, FL 32801	
TITLE	VP	3.1 TITLE	VP	☒ Change ☐ Addition
NAME	THARP, GARY	3.2 NAME	Rylands, Barbara	
STREET ADDRESS	600 COURTLAND ST S550	3.3 STREET ADDRESS	4207 Curry Ford Rd.	
CITY-ST-ZIP	ORLANDO FL	3.4 CITY-ST-ZIP	Orlando, FL 32806	
TITLE	VP	4.1 TITLE	VPD	☐ Change ☒ Addition
NAME	SABETI, MAX	4.2 NAME	SABETI, MAX	
STREET ADDRESS	4063 N GOLDENROD RD 208 →	4.3 STREET ADDRESS	4063 N GOLDENROD RD 208	
CITY-ST-ZIP	WINTER PARK FL	4.4 CITY-ST-ZIP	WINTER PARK FL	
TITLE	D	5.1 TITLE	VP	☐ Change ☒ Addition
NAME	VOGT, PETE	5.2 NAME	Jennings, Belton III	
STREET ADDRESS	BOX 590527	5.3 STREET ADDRESS	621 E. Central Blvd.	
CITY-ST-ZIP	ORLANDO FL	5.4 CITY-ST-ZIP	Orlando, FL 32802	
TITLE	P	6.1 TITLE	PP	☒ Change ☐ Addition
NAME	PHILPOT, GLENDA	6.2 NAME	Philpot, Glenda	
STREET ADDRESS	625 N. COLONIAL DRIVE	6.3 STREET ADDRESS	625 E. Colonial Drive	
CITY-ST-ZIP	ORLANDO FL	6.4 CITY-ST-ZIP	Orlando, FL 32803	

5/16/29

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)(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 above, or on an attachment with an address.

SIGNATURE: [signature] Belton E. Jennings III 2/5/95 407 422 5143
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Executive Vice President

0033160