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03-08-1999 90028 034 ****61.25

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NONPROFIT CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 705215

1. Corporation Name

THE GREATER CLEARWATER ASSOCIATION OF REALTORS, INC.

Principal Place of Business

1330 CLEVELAND STREET
 CLEARWATER FL 34615

Mailing Address

P O BOX 1259
 CLEARWATER FL 34617
 US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

02/18/1963

4. FEI Number

59-1006368

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

9. Name and Address of Current Registered Agent

PIKLOR, NANNETTE
 1330 CLEVELAND ST
 P O BOX 1259
 CLEARWATER FL 34617

10. Name and Address of New Registered Agent

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 617.0502 and 617.1508, 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 617.0503, 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

TITLE D DELETE
 NAME HANLON, KEITH
 STREET ADDRESS 1330 CLEVELAND STREET
 CITY-ST-ZIP CLEARWATER FL 33755

TITLE VD DELETE
 NAME RILEY, NANCY
 STREET ADDRESS 1330 CLEVELAND STREET
 CITY-ST-ZIP CLEARWATER FL 33755

TITLE T DELETE
 NAME GREGOIRE, FRANK
 STREET ADDRESS 1330 CLEVELAND STREET
 CITY-ST-ZIP CLEARWATER FL

TITLE SD DELETE
 NAME WIKLE, PAUL
 STREET ADDRESS 1330 CLEVELAND ST
 CITY-ST-ZIP CLEARWATER FL 33755

TITLE PD DELETE
 NAME PIKLOR, NANNETTE
 STREET ADDRESS 1330 CLEVELAND ST.
 CITY-ST-ZIP CLEARWATER FL

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition
 1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY-ST-ZIP

2.1 TITLE President Change Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

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

4.1 TITLE Treasurer Change Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

5.1 TITLE President - Elect Change Addition
 5.2 NAME Phil Rogers
 5.3 STREET ADDRESS 1330 Cleveland St
 5.4 CITY-ST-ZIP Clearwater, FL 33755

6.1 TITLE Secretary Change Addition
 6.2 NAME Marilyn Tracy
 6.3 STREET ADDRESS 1330 Cleveland St
 6.4 CITY-ST-ZIP Clearwater, FL 33755

14. I 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)