2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Mar 17, 2008
Secretary of State

DOCUMENT# 708994

Entity Name: BAY COUNTY ASSOCIATION OF REALTORS, INC.

Current Principal Place of Business:

1123 HARRISON AVENUE
PANAMA CITY, FL 32401

New Principal Place of Business:

Current Mailing Address:

1123 HARRISON AVENUE
PANAMA CITY, FL 32401

New Mailing Address:

FEI Number: 59-1440029 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BURROSS, ELEANOR
1123 HARRISON AVENUE
PANAMA CITY, FL 32401 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: P ( ) Delete
Name: COX, JAN
Address: PO BOX 18007
City-St-Zip: PANAMA CITY BEACH, FL 32417

Title: PD ( ) Delete
Name: SWENK, VICKI
Address: PO BOX 27294
City-St-Zip: PANAMA CITY BEACH, FL 32411

Title: S ( ) Delete
Name: FREE, REX
Address: P O BOX 19513
City-St-Zip: PANAMA CITY BEACH, FL 32417

Title: T ( ) Delete
Name: VIDER, JIM
Address: 8017 N. LAGOON DR
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: D ( ) Delete
Name: BOWMAN, JENNIFER
Address: 2705 WOODMERE DRIVE
City-St-Zip: PANAMA CITY, FL 32405

Title: D ( ) Delete
Name: HUGGINS, JAMES F
Address: 35 GREEN ISLAND WAY
City-St-Zip: DESTIN, FL 32550

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: VP (X) Change ( ) Addition
Name: CARROLL, LARRY K
Address: 2939 W 30TH COURT
City-St-Zip: PANAMA CITY, FL 32405

Title: PPR (X) Change ( ) Addition
Name: BOWMAN, SCOTT D
Address: 2705 WOODMERE DRIVE
City-St-Zip: PANAMA CITY, FL 32405

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: JAN COX P 03/17/2008

Electronic Signature of Signing Officer or Director — Date