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FILED

Mar 04 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 709011 (1)

1. Corporation Name

REALTOR ASSOCIATION OF SOUTH PALM BEACH COUNTY,  
INC.

Principal Place of Business

Mailing Address

3200 N. MILITARY TRAIL  
SUITE 100  
BOCA RATON FL 33431  
US3200 N. MILITARY TRAIL  
SUITE 100  
BOCA RATON FL 33431-6311  
US3. Date Incorporated or Qualified  
05/21/19653a. Date of Last Report  
02/02/19964. FEI Number  
59-1144537Applied For  
Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution☐ \$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City &amp; State

27 City &amp; State

23 Zip Country

28 Zip Country

24

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GOLDEN, ROBERT  
3200 N. MILITARY TRAIL  
BOCA RATON FL 33431

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME O'CONNELL, DEBBY  
STREET ADDRESS 267 S. OCEAN BLVD.  
CITY-ST-ZIP MANALAPAN FL ☒ DELETE1.1 TITLE VICE PRESIDENT ☐ Change ☐ Addition  
1.2 NAME WILLIAM TISON  
1.3 STREET ADDRESS 9804 S. MILITARY TRAIL, N-10  
1.4 CITY-ST-ZIP BOYNTON BEACH, FL, 33436TITLE P  
NAME MC CARTHY, ALBERTA  
STREET ADDRESS 98 SE 5TH AVE.  
CITY-ST-ZIP DELRAY BEACH FL ☐ DELETE2.1 TITLE DIRECTOR ☒ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIPTITLE T  
NAME ABBOTT, JAY  
STREET ADDRESS 200 W. CAMINO REAL #1  
CITY-ST-ZIP BOCA RATON FL 33432 ☐ DELETE3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIPTITLE S  
NAME EICHAS, TERRY  
STREET ADDRESS 600 EAST ATLANTIC AVENUE  
CITY-ST-ZIP DELRAY BEACH FL ☐ DELETE4.1 TITLE DIRECTOR ☒ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIPTITLE D  
NAME RICHARDSON, WILLIAM  
STREET ADDRESS 6100 GLADES ROAD #107  
CITY-ST-ZIP BOCA RATON FL ☐ DELETE5.1 TITLE PRESIDENT ☒ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIPTITLE D  
NAME MUELLER, MYRA  
STREET ADDRESS 2301 WEST GLADES ROAD  
CITY-ST-ZIP BOCA RATON FL ☒ DELETE6.1 TITLE DIRECTOR ☐ Change ☒ Addition  
6.2 NAME TEROMA LAHMAN  
6.3 STREET ADDRESS 6943 S.W. 18th STREET  
6.4 CITY-ST-ZIP BOCA RATON, FL, 33433

14. I do 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. Sign on attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0038690

CP2E037 (9/96)