

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 18, 2001 8:00 am
Secretary of State

01-18-2001 90012 029 ****70.00

0029961

DOCUMENT # 710458

1. Entity Name

MELBOURNE AREA ASSOCIATION OF REALTORS, INC.

Principal Place of Business

**1450 SARNO RD
 MELBOURNE FL 32935**

Mailing Address

**1450 SARNO RD
 MELBOURNE FL 32935**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2001812

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KANE, MATILDA J
 1450 SARNO ROAD
 MELBOURNE FL 32935**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **WILLMARTH, ROBERT N**
 CITY-ST-ZIP **4120-A MINTON ROAD
 W MELBOURNE FL 32904**

TITLE ☒ Change ☐ Addition
 NAME **P**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **RUBIN, JEAN M**
 CITY-ST-ZIP **7025 N. WICKHAM RD. #113
 MELBOURNE FL 32940**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **S**
 STREET ADDRESS **HOLSTEIN, JANE A**
 CITY-ST-ZIP **1460 BAYTREE DR NE
 PALM BAY FL 32905**

TITLE ☒ Change ☐ Addition
 NAME **D**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☒ Delete
 NAME **D**
 STREET ADDRESS **COLLINS, EUGENE J**
 CITY-ST-ZIP **5275 BABCOCK ST. NE #2
 PALM BAY FL 32905**

TITLE ☐ Change ☒ Addition
 NAME **D**
 STREET ADDRESS **Murray, Wendy E.**
 CITY-ST-ZIP **406 Ocean Avenue
 Melbourne Beach FL 32951**

TITLE ☒ Delete
 NAME **T**
 STREET ADDRESS **STUHLMEYER, ROBERT C**
 CITY-ST-ZIP **1800 PENN STREET #3
 MELBOURNE FL 32901**

TITLE ☐ Change ☒ Addition
 NAME **T**
 STREET ADDRESS **Taylor, Nancy R**
 CITY-ST-ZIP **777 No. Hwy. A-1-A. #101
 Indialantic FL 32903**

TITLE ☐ Delete
 NAME **P**
 STREET ADDRESS **SLAUGHTER, CHRISTINE P**
 CITY-ST-ZIP **2550 PALM BAY RD. NE #108
 PALM BAY FL 32905**

TITLE ☒ Change ☐ Addition
 NAME **D**
 STREET ADDRESS
 CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with or without other like empowered.

SIGNATURE:

Robert N. Willmarth
REQUIRED

Robert N. Willmarth 1/9/01

321 / 242-2211

CR2E037 (10/00)