

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712553

FILED
Apr 02, 2004
Secretary of State**Entity Name:** NORTHEAST FLORIDA ASSOCIATION OF REALTORS, INC.**Current Principal Place of Business:**7801 DEERCREEK CLUB ROAD
JACKSONVILLE, FL 32256 US**New Principal Place of Business:****Current Mailing Address:**7801 DEERCREEK CLUB ROAD
JACKSONVILLE, FL 32256**New Mailing Address:****FEI Number:** 59-0306124**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**EAST, WILLIAM GLENN
7801 DEERCREEK CLUB RD
JACKSONVILLE, FL 32256 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: TD () Delete
Name: FOLDS, SAM JR
Address: 7801 DEERCREEK CLUB RD
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: SD () Delete
Name: SHERRER, LINDA
Address: 7801 DEERCREEK CLUB RD
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: PD () Delete
Name: KAISER, SELBY C
Address: 7801 DEERCREEK CLUB RD
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: PED () Delete
Name: BOUTTE, ANDRE
Address: 7801 DEERCREEK CLUB ROAD
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: D () Delete
Name: EAST, WILLIAM G
Address: 7801 DEERCREEK CLUB RD
City-St-Zip: JACKSONVILLE, FL 32256 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: SEITZINGER, KAY
Address: 7801 DEERCREEK CLUB RD
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: PED (X) Change () Addition
Name: SHERRER, LINDA
Address: 7801 DEERCREEK CLUB RD
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: SD (X) Change () Addition
Name: DAVIDSON, SHARON
Address: 7801 DEERCREEK CLUB ROAD
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: PD (X) Change () Addition
Name: BOUTTE, ANDRE
Address: 7801 DEERCREEK CLUB ROAD
City-St-Zip: JACKSONVILLE, FL 32256 US

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: WILLIAM GLENN EAST

D

04/02/2004

Electronic Signature of Signing Officer or Director

Date