

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 10, 2004 8:00 am**  
**Secretary of State**

05-10-2004 90469 028 \*\*\*\*61.25

**DOCUMENT # 714938**

1. Entity Name

SANTA ROSA COUNTY BOARD OF REALTORS, INC.



Principal Place of Business

5373 STEWART ST.  
MILTON FL 32570  
US

Mailing Address

P O BOX 803  
MILTON FL 32572  
US

04000073



MOORE CR2E037 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1836651

Applied For

Not Applicable

Zip

Country

Zip

Country

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

EDWARDS, CATHY G  
3682 WINTERDALE DR.  
PACE FL 32571

Name  
Lisa Gifford

Street Address (P.O. Box Number is Not Acceptable)  
6000 Kingswood Drive

City  
Milton

FL Zip Code  
32570

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. I am familiar with, and accept the obligations of registered agent.

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**  
**Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JONES, PHIL 6408 HWY 90 STE 4 MILTON FL 32570	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROWELL, KEITH 6512 HWY 87 MILTON FL 32570	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GERDTS, CATHY 3682 WINTERDALE DR PACE FL 32571	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PRESTON, BETTY 5312 HAMILTON BRIDGE ROAD MILTON FL 32570	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HELMS, ALVIN 6000 OSAGE TRAIL MILTON FL 32570	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEEKS, LISA 4872 TIMBER RIDGE DR PACE FL 32571	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Lisa Gifford 6000 Milton Milton, FL 32570	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Sharon Howell P.O. Box 897 Milton, FL 32572	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JoAnn Sisson 4750 Belandville Road Milton, FL 32570	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Cindy Cotton 4937 Hamilton Bridge Road Pace, FL 32571	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Bill Wallace 6225 RobinHood Drive Milton, FL 32570	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Mary Padgett 5819 Chism Trail Milton, FL 32570	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-30-04