

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714938

FILED
Aug 19, 2008
Secretary of State

Entity Name: SANTA ROSA COUNTY BOARD OF REALTORS, INC.

Current Principal Place of Business:

5373 STEWART ST
MILTON, FL 32570 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 803
MILTON, FL 32572 US

New Mailing Address:

FEI Number: 59-1836651 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GRIMES, ANN
2059 PRITCHARD POINT DRIVE
NAVARRE, FL 32566 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: MCCRANIE, SANDY D
Address: 6000 MILTON
City-St-Zip: MILTON, FL 32570

Title: VP () Delete
Name: JONES, PHIL
Address: 6408 HWY 90
City-St-Zip: MILTON, FL 32570

Title: S () Delete
Name: MCGUIRE, PAULA
Address: 3278 ABEL AVENUE
City-St-Zip: PACE, FL 32571

Title: T () Delete
Name: GRIMES, ANN
Address: 2059 PRITCHARD POINT
City-St-Zip: NAVARRE, FL 32566

Title: D () Delete
Name: HOWELL, SHARON
Address: 5807 HWY 90
City-St-Zip: MILTON, FL 32583

Title: D () Delete
Name: PADGETT, MARY
Address: 5819 CHISM TRAIL
City-St-Zip: MILTON, FL 32570

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JONES, PHIL D
Address: 7390 SAN RAMON DRIVE
City-St-Zip: MILTON, FL 32583

Title: VP (X) Change () Addition
Name: GRIMES, ANN
Address: 2059 PRITCHARD POINT
City-St-Zip: NAVARRE, FL 32566

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

Title: T (X) Change () Addition
Name: MARTIN, BRENDA
Address: 7618 CHUMUCKLA HWY
City-St-Zip: PACE, FL 32571

Title: D (X) Change () Addition
Name: BROWN, BEVERLY J
Address: 5535 STEWART STREET
City-St-Zip: MILTON, FL 32570

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

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: ANN GRIMES

VP

08/19/2008

Electronic Signature of Signing Officer or Director

Date