FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

-1 AM 8:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **719396** **(4)**

1. Corporation Name

FORT MYERS BEACH BOARD OF REALTORS, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
1025 SECOND STREET P.O. BOX 4004 FT MYERS BCH FL 33932-1004	1025 SECOND STREET P.O. BOX 4004 FT MYERS BCH FL 33932-1004

3. Date Incorporated or Qualified: **09/28/1970**
3a. Date of Last Report: **05/01/1994**
4. FEI Number: **59-1367495** ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc 22	Suite, Apt. #, etc 27
City & State 23	City & State 28
Zip / County 24 / 25	Zip / County 29 / 30

9. Name and Address of Current Registered Agent

ROTH, JOSEPH E
245 SW 43RD TERR
CAPE CORAL FL 33914

10. Name and Address of New Registered Agent

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and the # applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PE	11 TITLE	P	☒ Change ☐ Addition
NAME	NESBIT, KATHERINE R	12 NAME	NESBIT, KATHERINE R	
STREET ADDRESS	7700 ESTERO BLVD A206	13 STREET ADDRESS	7700 ESTERO BLVD. A206	
CITY-ST-ZIP	FT MYERS BCH FL	14 CITY-ST-ZIP	FT. MYERS BCH FL 33931	
TITLE	P	21 TITLE	PE	☒ Change ☐ Addition
NAME	FROST, JANET C	22 NAME	HAATAJA, JUDY	
STREET ADDRESS	18116 CUTLASS	23 STREET ADDRESS	400 BAYLAND ROAD	
CITY-ST-ZIP	FT MYERS BCH FL	24 CITY-ST-ZIP	FT. MYERSBCH FL 33931	
TITLE	S	31 TITLE	S	☒ Change ☐ Addition
NAME	LAISHLEY, BOBBIE	32 NAME	CROKER, ANGELA	
STREET ADDRESS	16051 KELLY WOODS DR	33 STREET ADDRESS	8425 LAGOON ROAD	
CITY-ST-ZIP	FT MYERS FL	34 CITY-ST-ZIP	FT. MYERS BCH FL 33931	
TITLE	T	41 TITLE	D	☒ Change ☐ Addition
NAME	JORGENSEN, MARILYN	42 NAME	JORGENSEN, MARILYN	
STREET ADDRESS	7148 ESTERO BLVD APT 230	43 STREET ADDRESS	7148 ESTERO BLVD APT 230	
CITY-ST-ZIP	FT MYERS BCH FL	44 CITY-ST-ZIP	FT MYERS BCH FL 33931	
TITLE	D	51 TITLE	D	☐ Change ☒ Addition
NAME	SIMPSON, BETTY D	52 NAME	MYERS, THOMAS	
STREET ADDRESS	164 CURLEW ST	53 STREET ADDRESS	21461 WIDGEON TERRACE	
CITY-ST-ZIP	FT MYERS BCH FL	54 CITY-ST-ZIP	FT MYERS BCH FL 33931	
TITLE	D	61 TITLE	T	☒ Change ☐ Addition
NAME	TITUS, JESSICA	62 NAME	Jay Ursoleo	
STREET ADDRESS	BOX 6282 N/A	63 STREET ADDRESS	9017 Ligon Court	
CITY-ST-ZIP	FT MYERS BCH FL	64 CITY-ST-ZIP	Ft. Myers, FL 33908	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify f... ...g(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my ... ...s 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, or on an attachment with any address.

SIGNATURE: Katherine R. Nesbit 4/25/95 813-463-9706
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0060324