

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 17 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **727585** (2)

1. Corporation Name

**BONITA SPRINGS BOARD OF REALTORS, INC.**



Principal Place of Business <b>27313 OLD 41 ROAD SE BONITA SPRINGS FL 33923 US</b>		Mailing Address <b>27313 SE OLD 41 ROAD BONITA SPRINGS FL 33923 US</b>		3. Date Incorporated or Qualified <b>10/01/1973</b>	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number <b>59-1708371</b>	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		Applied For	
22 City & State		27 City & State		Not Applicable	
23 Zip		28 Zip		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
24 Country		29 Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
				7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
<b>SPEAR, JOHN D. SUNSHINE PROFESSIONAL PLAZA 9200 BONITA BEACH ROAD #204 BONITA SPRINGS FL 33923</b>		81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City <b>FL</b> 85 Zip Code	

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE Edward K. Zant Edward K. Zant DATE 4/13/98  
Signature, typed or printed name of registered agent and use if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P MEASE, ROD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	P/D BILL HOPMANN <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	3900 DIA DEL REY	1.2 NAME	27313 Old 41 Rd. SE
STREET ADDRESS	BONITA SPRINGS FL	1.3 STREET ADDRESS	Bonita Springs, FL 34135
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	S KATZ, CHARLOTTE <input checked="" type="checkbox"/> DELETE	2.1 TITLE	P.E./D JOHN MITCHELL <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	3870 BONITA BCH RD	2.2 NAME	27313 Old 41 Rd. SE
STREET ADDRESS	BONITA SPRINGS FL	2.3 STREET ADDRESS	Bonita Springs, FL 34135
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	T ZANT, EDWARD <input type="checkbox"/> DELETE	3.1 TITLE	
NAME	9040 BONITA BCH RD	3.2 NAME	
STREET ADDRESS	BONITA SPRINGS FL	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	D BURDICK, DAN <input checked="" type="checkbox"/> DELETE	4.1 TITLE	S/D GAIL CARLINE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	3870 BONITA BCH RD	4.2 NAME	27313 Old 41 Rd. SE
STREET ADDRESS	BONITA SPRINGS FL	4.3 STREET ADDRESS	Bonita Springs, FL 34135
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	D DOUGLAS, VICKEE <input checked="" type="checkbox"/> DELETE	5.1 TITLE	E-VP LINDA LANG <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	9040 BONITA BCH RD	5.2 NAME	27313 Old 41 Rd. SE
STREET ADDRESS	BONITA SPGS FL	5.3 STREET ADDRESS	Bonita Springs, FL 34135
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	D HARNAR, HARRIET <input checked="" type="checkbox"/> DELETE	6.1 TITLE	D MARYLOU WITSKEN <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	3451 BONITA BAY BLVD #202	6.2 NAME	27313 Old 41 Rd. SE
STREET ADDRESS	BONITA SPGRS FL	6.3 STREET ADDRESS	Bonita Springs, FL 34135
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Edward K. Zant 4/13/98 941-992-6771

CR2E037 (10/97)