

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735887

FILED
Jan 22, 2009
Secretary of State

Entity Name: DIXIE-GILCHRIST-LEVY COUNTIES BOARD OF REALTORS, INC.

Current Principal Place of Business:

4 W. PARK AVE.
CHIEFLAND, FL 32626 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 2059
CHIEFLAND, FL 32644 US

New Mailing Address:

FEI Number: 59-2519740

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MERRITT, LINDA
4 W. PARK AVE
CHIEFLAND, FL 32626 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: PD () Delete
Name: BAYNARD, OWEN
Address: P.O. 485
City-St-Zip: CHIEFLAND, FL 32644

Title: D () Delete
Name: SCHWARTZ, ROBIN
Address: PO 2200
City-St-Zip: HIGH SPRINGS, FL 32655

Title: SD () Delete
Name: SMITH, KAREN
Address: 9651 NE 110 AVE
City-St-Zip: ARCHER, FL 32618

Title: D () Delete
Name: KEARNS, KEITH
Address: 10890 SW 72ND CRT
City-St-Zip: CHIEFLAND, FL 32626

Title: TD () Delete
Name: EDWARDS, DEE
Address: 905 MAIN ST
City-St-Zip: HIGH SPRINGS, FL 32643

Title: D () Delete
Name: BAXTER, LISA
Address: 605 N MAIN
City-St-Zip: CHIEFLAND, FL 32626

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change () Addition
Name: AMES, RUSTIE
Address: 700 SW 105TH ST
City-St-Zip: TRENTON, FL 32693

Title: D (X) Change () Addition
Name: SMITH, KAREN
Address: 9651 NE 110 AVE
City-St-Zip: ARCHER, FL 32618

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

Title: TD (X) Change () Addition
Name: CAMFFERMAN, LORI
Address: 7139 NE 21ST PLACE
City-St-Zip: HIGH SPRINGS, FL 32643

Title: SD (X) Change () Addition
Name: DOWNING, DIANA
Address: PO 269
City-St-Zip: STEINHATCHEE, FL 32628

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: OWEN F BAYNARD

PRES

01/22/2009

Electronic Signature of Signing Officer or Director

Date