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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 AM 9:17

DOCUMENT # **735897** **(1)**

1. Corporation Name

SEBRING BOARD OF REALTORS, INC.

Principal Place of Business	Mailing Address
3200 US 27 SOUTH, STE.204 SEBRING FL 33870	3200 US 27 SOUTH, STE.204 SEBRING FL 33870

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/24/1976
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-1684961 ☐ 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 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

FULCHER, LYNDA D
3200 US 27 SOUTH, STE.204
SEBRING FL 33870

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 title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE	~~P~~ D	☐ Change ☐ Addition
NAME	SWAINE, MARY L	12 NAME	PADGETT, LANCE L	
STREET ADDRESS	1731 BIGNONIA DR	13 STREET ADDRESS	1427 US 27 S	
CITY-ST-ZIP	SEBRING FL	14 CITY-ST-ZIP	SEBRING FL 33870	
TITLE	P	21 TITLE	~~P-Elect~~ D	☒ Change ☐ Addition
NAME	ECKMAN, JEAN	22 NAME	BORING, LINDA W	
STREET ADDRESS	720 SEBRING SO	23 STREET ADDRESS	2359 US 27 S	
CITY-ST-ZIP	SEBRING FL	24 CITY-ST-ZIP	SEBRING FL 33870	
TITLE	D	31 TITLE	~~VP~~ D	☒ Change ☐ Addition
NAME	PACK, FAYE	32 NAME	KNUTSON, IRENE	
STREET ADDRESS	1981 US 27 S	33 STREET ADDRESS	2701 SR 66	
CITY-ST-ZIP	SEBRING FL	34 CITY-ST-ZIP	SEBRING FL 33870	
TITLE		41 TITLE	~~S~~ D	☒ Change ☐ Addition
NAME		42 NAME	HERNANDEZ, BEVERLY	
STREET ADDRESS		43 STREET ADDRESS	3163 US HIGHWAY 27 S	
CITY-ST-ZIP		44 CITY-ST-ZIP	SEBRING FL 33870	
TITLE		51 TITLE	~~T~~ D	☐ Change ☐ Addition
NAME		52 NAME	MARABEL, STEVE	
STREET ADDRESS		53 STREET ADDRESS	2359 US 27	
CITY-ST-ZIP		54 CITY-ST-ZIP	SEBRING FL 33870	
TITLE		61 TITLE	EO	☒ Change ☐ Addition
NAME		62 NAME	FULCHER, LYNDA D	
STREET ADDRESS		63 STREET ADDRESS	3200 US 27 S	
CITY-ST-ZIP		64 CITY-ST-ZIP	SEBRING FL 33870	

RETURNED BY MAY 1

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Lynda D Fulcher 5/1/95 (813) 385-6014
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
LYNDA D FULCHER ED

0015104