

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 8:00 am
Secretary of State

04-14-2008 90065 022 ****61.25

DOCUMENT # 737179

1. Entity Name
EAST PASCO ASSOCIATION OF REALTORS, INC.



Principal Place of Business
**5026 7TH ST
ZEPHYRHILLS, FL 33540**

Mailing Address
**5026 7TH ST
ZEPHYRHILLS, FL 33540**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04072008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
59-1755416

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**YAKSETIC, FRANCES B.
5026 7TH STREET
ZEPHYRHILLS, FL 33540**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title (address)

(NOTE: Registered Agent signature required when renewing)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	D	☐ Delete
NAME	D'OVILIO, JOHN	
STREET ADDRESS	13981 7TH ST	
CITY-STATE-ZIP	DADE CITY, FL 33525	
TITLE	P	☐ Delete
NAME	DE LARUE, GREG	
STREET ADDRESS	37200 GUNFON AVE	
CITY-STATE-ZIP	DADE CITY, FL 33526	
TITLE	TD	☐ Delete
NAME	PRILLIMAN, MICHAEL	
STREET ADDRESS	38122 12TH AVE	
CITY-STATE-ZIP	ZEPHYRHILLS, FL 33541	
TITLE	D	☒ Delete
NAME	LINDEL, PATTY	
STREET ADDRESS	5720 GALL BLVD	
CITY-STATE-ZIP	ZEPHYRHILLS, FL 33542	
TITLE	D	☒ Delete
NAME	MCDONOUGH, JODY	
STREET ADDRESS	34619 SR 54	
CITY-STATE-ZIP	ZEPHYRHILLS, FL 33542	
TITLE	T	☒ Delete
NAME	MANN, MICHAEL	
STREET ADDRESS	262 30 ST SUITE 542	
CITY-STATE-ZIP	LUTZ, FL 33544	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	Secretary	☐ Change ☒ Addition
NAME	LEE MURRELLMAN	
STREET ADDRESS	7705 GAIL BLVD	
CITY-STATE-ZIP	ZEPHYRHILLS, FL 33542	
TITLE	Treasurer	☐ Change ☒ Addition
NAME	SUSAN DAVIS	
STREET ADDRESS	5610 GERT STREET	
CITY-STATE-ZIP	ZEPHYRHILLS, FL 33541	
TITLE	P	☐ Change ☒ Addition
NAME	MARLY FONES	
STREET ADDRESS	38122 12TH AVE	
CITY-STATE-ZIP	ZEPHYRHILLS, FL 33541	
TITLE	D	☐ Change ☒ Addition
NAME	KATHY Blome	
STREET ADDRESS	34619 SR 54	
CITY-STATE-ZIP	ZEPHYRHILLS, FL 33542	
TITLE	D	☐ Change ☒ Addition
NAME	ROYAUNTANNER	
STREET ADDRESS	5710 GAIL BLVD	
CITY-STATE-ZIP	ZEPHYRHILLS, FL 33541	
TITLE	D	☐ Change ☒ Addition
NAME	CANDY NATHIE	
STREET ADDRESS	38008 LIVE OAK DR	
CITY-STATE-ZIP	DADE CITY, FL 33523	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 149, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other blocks empowered.

SIGNATURE:

Frances B. Yaksetic
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/08

813-783-3794