

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743325

FILED
Mar 18, 2008
Secretary of State

Entity Name: CHIPOLA AREA BOARD OF REALTORS, INC.

Current Principal Place of Business:

4277 LAFAYETTE ST.
MARIANNA, FL 32446

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 238
MARIANNA, FL 32447

New Mailing Address:

FEI Number: 59-2147602

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STUART, VIRGINIA C
2929 RUSS ST.
MARIANNA, FL 32446 US

Name and Address of New Registered Agent:

ROBERTS, JAMES M JR
4207 LAFAYETTE ST
MARIANNA, FL 32446 US

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: JAMES M. ROBERTS, JR

03/18/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MILTON, KATHY S
Address: 4325B LAFAYETTE ST
City-St-Zip: MARIANNA, FL 32446

Title: D () Delete
Name: SMITH, DEBBIE R
Address: 5371 PRARIEVIEW RD
City-St-Zip: GREENWOOD, FL 32443

Title: P () Delete
Name: STUART, VIRGINIA C
Address: 2929 RUSS ST.
City-St-Zip: MARIANNA, FL 32446

Title: VP () Delete
Name: ROBERTS, JAMES M JR
Address: 4207 LAFAYETTE STREET
City-St-Zip: MARIANNA, FL 32446

Title: ST () Delete
Name: DANIELS, ANGELA R
Address: 2805 RACE LN.
City-St-Zip: MARIANNA, FL 32448

Title: D () Delete
Name: CHADWELL, ELAINE
Address: 935 MAIN ST
City-St-Zip: CHIPLEY, FL 32428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: PP (X) Change () Addition
Name: STUART, VIRGINIA C
Address: 2929 RUSS ST.
City-St-Zip: MARIANNA, FL 32446

Title: P (X) Change () Addition
Name: ROBERTS, JAMES M JR
Address: 4207 LAFAYETTE STREET
City-St-Zip: MARIANNA, FL 32446

Title: VP (X) Change () Addition
Name: DANIELS, ANGELA R
Address: 2805 RACE LN.
City-St-Zip: MARIANNA, FL 32448

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

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: JAMES M. ROBERTS, JR

P

03/18/2008

Electronic Signature of Signing Officer or Director

Date