2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

Jan 15, 2003 8:00 am Secretary of State **DOCUMENT # 756057** 1. Entity Name 01-15-2003 90190 028 ****61.25 NORTH OKALOOSA ASSOCIATION OF REALTORS, INC. Principal Place of Business Mailing Address 470 N. MAIN ST. 470 N. MAIN ST. CRESTVIEW FL 32536 **CRESTVIEW FL 32536** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-2171918 Applied For Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent rank Brooks BOWMAN, KATHLEEN Street Address (P.O. Box Number is Not Acceptable) 470 N. Main Street 470 N MAIN STREET CRESTVIEW FL 32536 21p Code 325 36 restulew 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 SIGNATURE 2.4 (NOTE: Registered Agent signature required when reinstating) 3.6 3,4 FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delete TITLE Change HEATON, MILDRED Addition NAME Linda Monte NAME STREET ADDRESS 470 NORTH MAIN ST 470 North MainSt. STREET ADDRESS CITY-ST-ZIF CRESTVIEW FL 32536 CITY-ST-ZIP Delete TITLE Change Addition FROST, DEBRA NAME Maryrose Scott 470 North Main St. NAME STREET ADDRESS 470 NORTH MAIN STREET STREET ADDRESS CITY-ST-ZIF CRESTVIEW-FL-32536 -CITY-ST-ZIP -Crestulew-FL-3-25-36 TITLE Delete TITLE **COOPER, DENNIS** Change NAME Addition 470 N. MAIN ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CRESTVIEW FL 32536 CITY-ST-ZIP TITLE 🔂 Delete TITLE **Change** ☐ Addition NAME BROOKS, FRANK Hottman Larry 470 North Main St NAME STREET ADDRESS 470 NORTH MAIN STREET STREET ADDRESS CITY-ST-ZIP CRESTVIEW FL 32536 Crestulew FL 32536 CITY-ST-ZIP TITLE Delete TITLE √Change WILSON, JULIE ☐ Addition NAME sandra McIntyre NAME 470 North Main Str STREET ADDRESS 470 N MAIN ST

Crestulew FL 32536 12. 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 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

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

Delete

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

CRESTVIEW FL 32536

BOWMAN, KATHLEEN

CRESTVIEW FL 32536

470 NORTH MAIN STREET

Crestulew FL

470 North Main St.

Frank Brooks

32536

Change

☐ Addition

FILED