FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # F9500006060 (6) REALTORS INFORMATION NETWORK, INC.						
				i iddilida (kid jaja) dikin adam da		
Frincipal Place of Business Mailing Address						
430 N. MICHIGAN AVE., 10TH FL. CHICAGO IL 60611 CHICAGO IL 60611 Mailing Address 430 N. MICHIGAN AVE., 1 CHICAGO IL 60611				et saur saus suit suit saus sitii 2011 (65)		
		E., 10TH FL.				
				3. Date Incorporated or Qualifie 12/12/1995	d 3a. Date of Last Report	
****	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
26				36-3981966	Not Applicable	
22 Stille, April 27		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
		City & State		6. Election Campaign Financing	Fee Required	
23		28	F , '		\$5.00 May Be Added to Fees	
Zφ>	Country	Zip	Country	8. This corporation has liability f	or intangible tax under s 199.032,	
24	9 Name and Address of Comm	29	30	Florida Statutes \[\] \	∕es 🙀 No	
- · · · · · · · · · · · · · · · · · · ·	9. Name and Address of Curr	ent Hegistered Agent	81 Na	10. Name and Address of Nev	v Registered Agent	
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET				81 Name 82 Street Address (P.O. Box Number is Not Acceptable)		
			82 Str			
SUITE 10			83			
	ASSEE FL 32301		24 0			
			84 City		FL 85 Zip Code	
 Pursuant or register 	to the provisions of Sections 607,050 red agent, or both, in the State of Ele	02 and 607.1508, Florida Statu	tes, the above name	d corporation submits this statement for the purish board of directors. I hereby accept the a	ourpose of changing its registered office	
familiär wi	ith, and accept the obligations of, Se	ction 607.0505, Florida Statute	s.	or s board or directors. Thereby accept the a	opointment as registered agent. I am	
SIGNATURE	Styrieture, typied or pointed name of rejectived ago					
12.				Rogistered Agent signature required when reinstelling! DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
Tillif	C	DELETE	1 1 TITLE	Secretary	Change Addition	
NAME	CHEE, WILLIAM S		1.2 NAME	Benjamin F. Blair		
STREET ADDRESS	The second secon		13 STREET ADDRE	S 5918 Southwest 35th	5918 Southwest 35th Street	
CHY-SI ZIP	HONOLULU HI 96813		1.4 CITY - ST - ZIP	Topeka, KS 66614		
1111	D DI AID, DEN	☐ DELETE	2 1 TITLE	Treasurer	Change Addition	
NAME ROBELL ANDROGE	BLAIR, BEN 2222 W 29TH ST		2.2 NAME	David M. Peretti		
STREET ADDRESS CITY+ST-ZIP	TOPEKA KS 66614		2 3 STREET ADDRE	SS 3 Manchester Road		
THILE	D	□ □ □ DELETE	2.4 CITY-ST-ZIP 3.1 TITLE	Winchester, MA 018	90—————————	
NAME	DEMUSZ, CARL	EJ	3 2 NAME		☐ Change ☐ Addition	
STREET ADDRESS	309 S MAIN ST		3.3 STREET ADDRE	ss		
C(TY - \$1 - 7)P	CAPE MAY COURTHOUSE NJ 08210		3.4 CITY - ST - ZIP			
THE	D	DELETE	4 1 THILE	8000013	405 Change Addition	
NAMI	SABBAG, ALLEN		4.2 NAME	8000017 -03/12/9601	1430007	
STREET ADDRESS	2000 GRAND AVE		4.3 STREET ADDRE	ss ***200.00		
OPY STZIP	DES MOINES IA 50312	□ DELER	4.4 CITY - ST - ZIP			
NAM:	EVANS, EDWARD J	DELETE	5 1 TITLE	}	☐ Change ☐ Addition	
5TREET ADDRESS	430 N. MICHIGAN AVE		5.2 NAME 5.3 STREET ADDRES	ce l		
CITY-ST-ZIF	CHICAGO IL 60611		5 3 STREET AUDRES	22		
TILLE	V	X DELETE	6 1 TITLE		Change Addition	
NAME	SCHLADWEILER, JOHN	••-	6.2 NAME		· ·	
STREET ADDRESS	430 N. MICHIGAN AVE.	_	6 3 STREET ADDRES	ss	2 2/12	
CITY-ST-ZIP	CHICAGO IL 60611	SEE ATTACHED	6.4 CITY-ST-ZIP		7/1	

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)(k). Fiorida 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 cath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Edward J. Evans 3/4/96 312/329-8531

THE FOLLOWING SHOULD ALSO BE DELETED:

Secretary Kristina Etter 430 N. Michigan Avenue Chicago, IL 60611

Treasurer Rod Buck 6709 Yellowstone Lane Parkland, FL 33067