

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G84754

FILED
Jan 31, 2008
Secretary of State

Entity Name: MULTIPLE LISTING SERVICE OF LAKE PLACID, INC.

Current Principal Place of Business:

124 EAST PARK AVENUE
LAKE PLACID, FL 33852 US

New Principal Place of Business:

Current Mailing Address:

124 EAST PARK AVENUE
LAKE PLACID, FL 33852 US

New Mailing Address:

FEI Number: 59-2368625 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHEEHAN, J. TIMOTHY
401 DALL HALL ROAD
LAKE PLACID, FL 33852 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: POLLARD, ANN
Address: 518 US HWY 27 SOUTH
City-St-Zip: LAKE PLACID, FL 33852

Title: P () Delete
Name: CARROLL, JAMES
Address: 208 N MAIN AVE
City-St-Zip: LAKE PLACID, FL 33852

Title: VP () Delete
Name: ROGERS, LARRY
Address: 1424 US HWY 27 N
City-St-Zip: LAKE PLACID, FL 33852

Title: S () Delete
Name: COMPTON, SUSAN
Address: 528 US HWY 27 SOUTH
City-St-Zip: LAKE PLACID, FL 33852

Title: AECE () Delete
Name: GODLESKI, LESLIE K
Address: 124 E. PARK AVE
City-St-Zip: LAKE PLACID, FL 33852

Title: T () Delete
Name: HUTCHINS, C. SHERI
Address: 1998 PLACID LAKES BLVD
City-St-Zip: LAKE PLACID, FL 33852

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HILL, JAMES
Address: 1505 US HWY 27 SOUTH
City-St-Zip: LAKE PLACID, FL 33852

Title: VP (X) Change () Addition
Name: EDWARDS, CAROL
Address: 15 N MAIN AVE
City-St-Zip: LAKE PLACID, FL 33852

Title: D (X) Change () Addition
Name: ROGERS, LARRY
Address: 1424 US HWY 27 N
City-St-Zip: LAKE PLACID, FL 33852

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

Title: CEO (X) Change () Addition
Name: GODLESKI, LESLIE K
Address: 124 E. PARK AVE
City-St-Zip: LAKE PLACID, FL 33852

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LESLIE K GODLESKI

CEO

01/31/2008

Electronic Signature of Signing Officer or Director

Date