

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)**

**FILED**  
**Sep 26 1997 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # M18394 (0)**  
1. Corporation Name  
**REGIONAL MULTIPLE LISTING SERVICE, INC.**



Principal Place of Business <b>3583 NORTHLAKE BLVD. LAKE PARK FL 33403 US</b>	Mailing Address <b>3583 NORTHLAKE BLVD. LAKE PARK FL 33403 US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>07/23/1985</b>	3a. Date of Last Report <b>05/20/1996</b>
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number <b>65-0005450</b>	Applied For <input type="checkbox"/> Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

**9. Name and Address of Current Registered Agent**

**MILLER, JAMES F.  
1400 CENTRE PARK BLVD.  
SUITE 800  
WEST PALM BEACH FL 33401**

**10. Name and Address of New Registered Agent**

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		<input type="checkbox"/> DELETE
TITLE	<b>P</b>	
NAME	<b>TAGG, DONNA</b>	
STREET ADDRESS	<b>3111 45TH ST., STE 4</b>	
CITY-ST-ZIP	<b>WEST PALM BEACH FL</b>	
TITLE	<b>VP</b>	
NAME	<b>TAGG, DONNA</b>	
STREET ADDRESS	<b>3111 45TH ST / STE 4</b>	
CITY-ST-ZIP	<b>WEST PALM BEACH FL</b>	
TITLE	<b>VPD</b>	
NAME	<b>DOOLEY, MICHAEL</b>	
STREET ADDRESS	<b>9148 BRIDGE RD.</b>	
CITY-ST-ZIP	<b>HOBE SOUND FL</b>	
TITLE	<b>TD</b>	
NAME	<b>ASSEF, RON</b>	
STREET ADDRESS	<b>2452 PGA BLVD.</b>	
CITY-ST-ZIP	<b>PALM BEACH GARDENS FL</b>	
TITLE	<b>SD</b>	
NAME	<b>LEONE, JO ANNE</b>	
STREET ADDRESS	<b>11811 U.S. HWY 1, STE 104</b>	
CITY-ST-ZIP	<b>NORTH PALM BEACH FL</b>	
TITLE	<b>D</b>	
NAME	<b>FITZGERALD, PATRICIA</b>	
STREET ADDRESS	<b>901 W. INDIANTOWN RD., STE 23</b>	
CITY-ST-ZIP	<b>JUPITER FL</b>	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
1.1 TITLE			
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE			
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE			
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE			
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE			
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE			
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

14. I do 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 annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (4/97)

## Regional MLS, Inc.

### 1997 Board of Directors

#### Officers:

Joan Marshall, President  
ERA Coastal Properties  
901 W. Indiantown Rd., Ste 23  
Jupiter, FL 33458  
746-9775 Fax #: 746-5322

JoAnne Leone, Vice President  
Illustrated Properties R.E., Inc.  
11811 U.S. Hwy 1, Ste 104  
North Palm Beach, FL 33408  
626-7000 Fax #: 627-0544

Lynne Covert, Secretary  
Investment Equity Corp.  
2151 Alt. A1A, Ste 400  
Jupiter, FL 33477  
744-9444 Fax #: 743-0127

Mike Dooley, Pres. Elect  
Homeport Realty, Inc.  
9148 Bridge Rd.  
Hobe Sound, FL 33475  
546-7355 Fax #: 546-3163

Ron Assef, Treasurer  
Re/Max Northern Palm Beaches  
2452 PGA Blvd.  
Palm Beach Gardens, FL 33410  
775-7300 Fax #: 775-7322

Donna Tagg, Immed. Past Pres.  
Coldwell Banker  
4352 Forest Hill Blvd.  
West Palm Beach, FL 33406  
642-1900 Fax #: 641-1342

#### Directors

Pat Fitzgerald  
ERA Coastal Properties  
901 W. Indiantown Rd., Ste 23  
Jupiter, FL 33458  
746-9775 Fax #: 746-5322

Sally Escott  
Prudential Florida Realty  
902 S. U.S. Hwy 1  
Jupiter, FL 33477  
744-2500 Fax #: 744-1694

Virginia Spencer  
Investment Equity Corp.  
2401 PGA Blvd., Ste 196  
Palm Beach Gardens, FL 33410  
626-5100 Fax #: 624-4418

Joyce Bartlett  
JTHS Association of REALTORS  
810 Saturn St., Ste 19/20  
Jupiter, FL 33458  
746-2707 Fax #: 575-9766

Mikie Porfidio  
Prudential Florida Realty  
902 S. U.S. Hwy 1  
Jupiter, FL 33477  
744-2500 Fax #: 744-1694

Bill Ross  
Brokers III Realty  
101 Bridge Rd.  
Tequesta, FL 33469  
747-3377 Fax #: 747-3881

David Horine  
Cameron Investments, Inc.  
4400 PGA Blvd., Ste 303  
Palm Beach Gardens, FL 33410  
626-8888 Fax #: 626-9679

Janet Branton  
RAPB Association of REALTORS  
701 Northpoint Parkway, Ste 110  
West Palm Beach, FL 33407  
688-9294 Fax #: 575-9766