2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M18394

FILED Jan 03, 2005 Secretary of State

Entity Name: REGIONAL MULTIPLE LISTING SERVICE, INC.

Current Principal Place of Business:					New Principal Place of Business:			
8895 N. MI	LITARY TRAIL							
301-D PALM BEA	CH GARDENS	S. FL 33410	US					
Current Mailing Address:					New Mailing Address:			
8895 N MIL	ITARY TRAIL							
301-D	.CH GARDENS	EI 33/10	US					
	65-0005450	FEI Number A		FEI Number	Not Appli	oablo ()	Cortificate of St	tatus Desired ()
			. , ,			, ,		` ,
Name and	Address of Co	urrent Regist	ered Agent:	Nar	me and A	Address o	f New Registere	d Agent:
SUITE 860	TRE PARK BLV							
The above			atement for the pu	irpose of cha	anging its	s registere	d office or registe	red agent, or both,
SIGNATUF	RE:							
	Electroni	c Signature of	Registered Ager	nt			Date	
Election Can	npaign Financing	Trust Fund Cor	ntribution ().					
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip: Title:	FITZGERALD, P. 901 W. INDIANT JUPITER, FL 33	OWN ROAD # 2:	3		ie: ress: -St-Zip:	D FITZGERAL 901 W. INDI JUPITER, FI	ANTOWN ROAD # 2	3
Name: Address: City-St-Zip:	LOWE, BOB 2901 N. A1A NORTH HUTCHII	NSON ISLAND, F	L 34949 US		ie: ress: -St-Zip:	LOWE, BOE 2901 N. A1A NORTH HUT		FL 34949 US
Title: Name: Address: City-St-Zip:	TD () WILSON, SUSAN 711 W. INDIANT JUPITER, FL 33	OWN ROAD					(X) Change () Addi NDREW METTO PARK ROAD NN, FL 33432 US	
Title: Name: Address: City-St-Zip:	SD () WETZEL, SHER 909 W. MIDWAY FORT PIERCE, I	road				VPD WETZEL, SI 909 W. MID FORT PIER		ition
Title: Name: Address: City-St-Zip:	D () BECKER, PAUL 9260 W INDIANT JUPITER, FL 33			Title Nam Addr City-	ie:		(X) Change () Addi 'ATRICIA ITARY TRAIL # 301D 'H GARDENS, FL 33)
Title: Name: Address: City-St-Zip:	D () CHOY, PHYLLIS 6671 INDIANTON JUPITER, FL 33	WN ROAD # 58		Title Nam Addr City-	ie:		(X) Change ()Addi LLIS NTOWN ROAD # 58 L 33458 US	ition

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PATRICIA CONNOR D 01/03/2005