

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000010479

FILED
May 19, 2005
Secretary of State

Entity Name: GADSDEN BOARD OF REALTORS, INC.

Current Principal Place of Business:

37 NORTH CLEVELAND STREET
QUINCY, FL 32351

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 994
QUINCY, FL 32353

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

J. KENNARD WHITTLE
37 NORTH CLEVELAND STREET
QUINCY, FL 32351 US

Name and Address of New Registered Agent:

CLOUD, FLAKE C
37 NORTH CLEVELAND STREET
QUINCY, FL 32351 US

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: FLAKE C. CLOUD

05/19/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: J. KENNARD WHITTLE,
Address: 37 NORTH CLEVELAND STREET
City-St-Zip: QUINCY, FL 32351

Title: SD () Delete
Name: TILLER, BECKY
Address: 1048 FL/GA HIGHWAY
City-St-Zip: HAVANA, FL 32333

Title: TD () Delete
Name: CLOUD, FLAKE
Address: 37 NORTH CLEVELAND STREET
City-St-Zip: QUINCY, FL 32351

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: AE (X) Change () Addition
Name: CLOUD, FLAKE C
Address: 37 NORTH CLEVELAND STREET
City-St-Zip: QUINCY, FL 32351

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

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

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

SIGNATURE: FLAKE C. CLOUD

AE

05/19/2005

Electronic Signature of Signing Officer or Director

Date