

FILE NOW: FILING FEE IS \$61.25

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Apr 18 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N04814** (2)

1. Corporation Name

NAVARRE BEACH BOARD OF REALTORS, INC.

Principal Place of Business

**8851 NAVARRE PKWY
NAVARRE FL 32566
US**

Mailing Address

**8851 NAVARRE PKWY
NAVARRE FL 32566-2149
US**



3. Date Incorporated or Qualified **08/22/1984** 3a. Date of Last Report **04/22/1996**

2. Principal Place of Business	2a. Mailing Address	4. FEI Number 59-2561916	Applied For ☐ Not Applicable
21	26	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
Suite, Apt. #, etc.	Suite, Apt. #, etc.	27	6. Election Campaign Financing Trust Fund Contribution ☐
22	27	28	\$5.00 May Be Added to Fees
City & State	City & State	29	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No
23	28	30	
Zip	Country	Zip	Country
24	25	29	30

9. Name and Address of Current Registered Agent

**FOUNTAIN, BETTY
1901 RUE LA FONTAINE
NAVARRE FL 32566**

10. Name and Address of New Registered Agent

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

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE *Betty Fountain* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P ☐ DELETE	1.1 TITLE	P ☒ Change ☐ Addition
NAME	FOUNTAIN, BETTY	1.2 NAME	DAVID G ADAMS
STREET ADDRESS	1901 RUE LA FONTAINE	1.3 STREET ADDRESS	7384 GRAND NAVARRE BLVD
CITY-ST-ZIP	NAVARRE FL	1.4 CITY-ST-ZIP	NAVARRE BEACH, FL 32566
TITLE	PE ☐ DELETE	2.1 TITLE	PE ☐ Change ☒ Addition
NAME	ADAMS, DAVID G.	2.2 NAME	ROBERT J. HARTLEY
STREET ADDRESS	7374 GRAND NAVARRE BLVD	2.3 STREET ADDRESS	6940 TOM KING BAYOU DRIVE
CITY-ST-ZIP	NAVARRE BEACH FL	2.4 CITY-ST-ZIP	NAVARRE, FL 32566
TITLE	S ☒ DELETE	3.1 TITLE	T ☐ Change ☒ Addition
NAME	SMITH, DEENA	3.2 NAME	WARREN MORGAN
STREET ADDRESS	1900 HWY 87 UNIT F	3.3 STREET ADDRESS	2743 PGA BLVD
CITY-ST-ZIP	NAVARRE FL	3.4 CITY-ST-ZIP	NAVARRE, FL 32566
TITLE	T ☒ DELETE	4.1 TITLE	S ☐ Change ☒ Addition
NAME	DEVILLE, JR. EARNEST	4.2 NAME	REBECCA ANN EVANS
STREET ADDRESS	P.O. BOX 18275 NA	4.3 STREET ADDRESS	1803 ALHAMBRA STREET
CITY-ST-ZIP	PENSACOLA FL	4.4 CITY-ST-ZIP	NAVARRE, FL 32566
TITLE	D ☒ DELETE	5.1 TITLE	D ☒ Change ☐ Addition
NAME	MORGAN, BETTY	5.2 NAME	JOHN C. DUNCAN
STREET ADDRESS	2743 PGA BLVD	5.3 STREET ADDRESS	8494 NAVARRE PARKWAY
CITY-ST-ZIP	NAVARRE FL	5.4 CITY-ST-ZIP	NAVARRE, FL 32566
TITLE	D ☒ DELETE	6.1 TITLE	D ☒ Change ☒ Addition
NAME	FORD, CATHY	6.2 NAME	BETTY FOUNTAIN
STREET ADDRESS	PO BOX 5175 N/A	6.3 STREET ADDRESS	
CITY-ST-ZIP	NAVARRE FL	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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *David G. Adams* DATE: **4/11/97** DAYTIME PHONE: **939-3880**

CR2E037 (9/96)