2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 06, 2001 8:00 am
Secretary of State
02-06-2001 90038 017 ****61.25

DOCUMENT # N04814

1. Entity Name

NAVARRE BEACH BOARD OF REALTORS, INC.

Principal Place of Business	Mailing Address
8851 NAVARRE PKWY NAVARRE FL 32566 US	3851 NAVARRE PKWY NAVARRE FL 32566 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-2561916 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DEASON, AL NAVARRE BEACH BOARD 8851 NAVARRE PKWY NAVARRE FL 32566	Name: Terry, Robbie Street Address (P.O. Box Number is Not Acceptable): 8851 Navarre Pkwy City: Navarre FL Zip Code: 32566

8. 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: Carie Rose 1-24-01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ADAMS, DAVID 7374 GRAND NAVBARRE BLVD GULF BREEZE FL 32566	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: D	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P DEASON, AL 2912 OAK HARBOR DR GULF BREEZE FL 32566	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: D	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DE DEASON, JAMES 2912 OAKL HARBOR DR. NAVARRE FL 32566	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: T Slye, Dorothy 1804 Prado St Navarre, FL 32566	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PE TERRY, ROBBIE 8172 POMPANO GULF BREEZE FL 32566	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: P	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MORGAN, WARREN 2743 PGA BLVD GULF BREEZE FL 32566	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: PE	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WILLIAMS, MARK 1455 NAUTILUS DR GULF BREEZE FL 32566	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP:	☐ Change ☐ Addition

CR2E037 (10/00)

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 1-24-01 939-3837
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #