2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008178

FILED Mar 09, 2007 Secretary of State

Entity Name: REALTORS CARE FOUNDATION OF GTAR, INC.

Current Principal Place of Business: New Principal Place of Business:

2918 W. KENNEDY BLVD. TAMPA, FL 33609

Current Mailing Address: New Mailing Address:

2918 W. KENNEDY BLVD. TAMPA, FL 33609

FEI Number: 86-1170640 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

AUSTIN, CAROL A CEO
2918 W. KENNEDY BLVD.
TAMPA, FL., FL 33609 US

AUSTIN, CAROL A CEO
2918 W. KENNEDY BLVD.
TAMPA, FL., FL 33609 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: CAROL A. AUSTIN 03/09/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P. () Delete Title: P. (X) Change () Addition Name: MONROE, BRADFORD Name: MONROE, BRADFORD

 Name:
 MONROE, BRADFORD
 Name:
 MONROE, BRADFORD

 Address:
 509 S.57TH ST.,
 Address:
 509 S. 57TH ST.,

 City-St-Zip:
 TAMPA, FL 33619
 City-St-Zip:
 TAMPA, FL 33619

 $\label{eq:title:Title:V} \textit{Title:} \qquad \textit{V} \qquad \textit{() Delete} \qquad \qquad \textit{Title:} \qquad \textit{() Change () Addition}$

 Name:
 RODRIGUEZ, JACK
 Name:

 Address:
 216 SHORE CREST DR.
 Address:

 City-St-Zip:
 TAMPA, FL 33559
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

 Name:
 FARMER, DEBORAH
 Name:

 Address:
 2104 KYRA DRIVE
 Address:

 City-St-Zip:
 TAMPA, FL 33612
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: CAROL A. AUSTIN CEO 03/09/2007