

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 08, 2010
Secretary of State

Entity Name: REALTORS CARE FOUNDATION OF GTAR, INC.

Current Principal Place of Business:

2918 W. KENNEDY BLVD.
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

2918 W. KENNEDY BLVD.
TAMPA, FL 33609

New Mailing Address:

FEI Number: 86-1170640

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: MCFOLLING, SALLY I
Address: 1018 SYMPHONY ISLES BLVD.
City-St-Zip: APOLLO BEACH, FL 33572

Title: V
Name: KING, LAURIE
Address: 454 MARMORA AVE
City-St-Zip: TAMPA, FL 33606

Title: S
Name: PEREZ, JOE J
Address: 814 W PLYMOUTH ST
City-St-Zip: TAMPA, FL 33603

Title: T
Name: ANGELO, CHRISTOPHER
Address: 4415 CARROLLWOOD VILLAGE DR
City-St-Zip: TAMPA, FL 33624

Title: D
Name: MANNING, MARY A
Address: 25421 TRADEWINDS DR
City-St-Zip: LAND O'LAKES, FL 34639

Title: D
Name: OLIVER, ELEANOR
Address: 8742 TANTALLON CR
City-St-Zip: TAMPA, FL 33647

I hereby 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 all other like empowered.

SIGNATURE: CAROL A. AUSTIN

CEO

02/08/2010

Electronic Signature of Signing Officer or Director

Date