

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22778

FILED
Jan 09, 2012
Secretary of State

Entity Name: DIXIE-GILCHRIST-LEVY MULTIPLE LISTING SERVICE, INC.

Current Principal Place of Business:

4W PARK AVE
CHIEFLAND, FL 32626 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2059
CHIEFLAND, FL 32644 US

New Mailing Address:

FEI Number: 59-2843794

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS, LORENE
CENTURY 21 LORENE THOMAS REALTY INC.
HWY 98 S
OLD TOWN, FL 32680 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: BAYNARD, OWEN
Address: PO 485.
City-St-Zip: CHIEFLAND, FL 32644

Title: VP
Name: MELANIE, HUTCHISON
Address: PO 1692
City-St-Zip: CHIEFLAND, FL 32644 32

Title: D
Name: ABBISS, CAROLE
Address: PO 114
City-St-Zip: BELL, FL 32619

Title: D
Name: MCNULTY, PATRICIA
Address: 8110 NW 172 ND LANE
City-St-Zip: FANNING SPRINGS, FL 32693

Title: TD
Name: PAUL, TROKE
Address: PO 1208
City-St-Zip: TRENTON, FL 32693

Title: S
Name: KAREN, SMITH
Address: 190 E THRASHER
City-St-Zip: BRONSON, FL 32621

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: PAUL TROKE

TD

01/09/2012

Electronic Signature of Signing Officer or Director

Date