FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
'95 APR 21 AM 9:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N22799 (3)

1. Corporation Name
GADSDEN COUNTY BOARD OF REALTORS, INC.

Principal Place of Business	Mailing Address
37 N. CLEVELAND ST. QUINCY FL 32351	37 N. CLEVELAND ST. QUINCY FL 32351

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/01/1987
3a. Date of Last Report: 01/27/1994
4. FEI Number: 59-3179761 ☐ Applied For ☐ Not Applicable
2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22) (27)
City & State (23) (28)
Zip (24) Country (25) Zip (29) Country (30)
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$60.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SHARPTON, JACQUELYN
20 N. GRAVES ST.
QUINCY FL 32351

10. Name and Address of New Registered Agent

81 Name: JOYCE, MARY DALE
82 Street Address (P.O. Box Number is Not Acceptable): 14130 MERIDIAN ROAD
83
84 City: TALLAHASSEE FL 85 Zip Code: 32312

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Mary Dale Joyce — MARY DALE JOYCE — 4-18-95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	PD	XX Change ☐ Addition
NAME	SHARPTON, JACQUELYN	1.2 NAME	JOYCE, NARY DALE	
STREET ADDRESS	RT. 4, BOX 256	1.3 STREET ADDRESS	14130 MERIDIAN ROAD	
CITY-ST-ZIP	QUINCY FL	1.4 CITY-ST-ZIP	TALLAHASSEE, FL. 32312	
TITLE	VD	2.1 TITLE	VD	XX Change ☐ Addition
NAME	JOYCE, MARY DALE	2.2 NAME	HUGHES, D. WILLIAM	
STREET ADDRESS	14130 MERIDIAN RD.	2.3 STREET ADDRESS	205 LIVE OAK LANE	
CITY-ST-ZIP	TALLAHASSEE FL	2.4 CITY-ST-ZIP	HAVANA, FL. 32333	
TITLE	SD	3.1 TITLE	SD	XX Change ☐ Addition
NAME	MCPHERSON, VIRGINIA	3.2 NAME	WHITTLE, J. K.	
STREET ADDRESS	RT. 2, BOX 187-B	3.3 STREET ADDRESS	37 NORTH CLEVELAND STREET	
CITY-ST-ZIP	QUINCY FL	3.4 CITY-ST-ZIP	QUINCT, FL 32351	
TITLE	TD	4.1 TITLE		☐ Change ☐ Addition
NAME	TOOLE, GEORGE T	4.2 NAME		
STREET ADDRESS	37 N. CLEVELAND ST.	4.3 STREET ADDRESS		
CITY-ST-ZIP	QUINCY FL	4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Mary Dale Joyce — MARY DALE JOYCE — 4-18-95 — 904-224-2300
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

600107