

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47557

FILED
Jan 03, 2011
Secretary of State

Entity Name: OCALA/MARION COUNTY ASSOCIATION OF REALTORS, INC.

Current Principal Place of Business:

3105 N.E. 14 ST.
OCALA, FL 34470

New Principal Place of Business:

Current Mailing Address:

3105 N.E. 14 ST.
OCALA, FL 34470

New Mailing Address:

FEI Number: 59-6159045

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YONCE, DARLENE
3105 N.E. 14 ST.
OCALA, FL 34470 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: BRYANT, KIM
Address: 2226 E SILVER SPRINGS BLVD
City-St-Zip: OCALA, FL 34470

Title: VP
Name: RAY, JUDY
Address: 1918 SE 17 STREET
City-St-Zip: OCALA, FL 34471

Title: VP
Name: ROUNTREE, JOHN W
Address: P.O. BOX 354
City-St-Zip: FT MCCOY, FL 32134

Title: T
Name: ALVORD, RANDALL
Address: 1811 E FORT KING ST
City-St-Zip: OCALA, FL 34471

Title: D
Name: WHITE, ANTHONY
Address: 2226 E SILVER SPRINGS BLVD
City-St-Zip: OCALA, FL 34470

Title: D
Name: PETTICREW, JAMES
Address: 3251 SE 31 ST
City-St-Zip: OCALA, FL 34471

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: DARLENE YONCE

AE

01/03/2011

Electronic Signature of Signing Officer or Director

_____ Date