


Certified Mail 7001 2510 0008 6540 3538

**2004 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**\* Apr 02, 2004 08:00 AM  
Secretary of State**

<b>DOCUMENT # N92000000722</b> 1. Entity Name WAUCHULA BOARD OF REALTORS, INC.	
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Principal Place of Business 206 N. 6TH AVENUE WAUCHULA, FL 33873 US	Mailing Address PO BOX 1312 WAUCHULA, FL 33873 US
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<b>DO NOT WRITE IN THIS SPACE</b>
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03262004 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-0413826	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  DASHER, RICHARD F 702 S. 6TH AVENUE WAUCHULA, FL 33873
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<b>DO NOT WRITE IN THIS SPACE</b>
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

<b>Filing Fee is \$61.25 Due by May 1, 2004</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	UD00000101867 04/02/04-80031-008 61.25
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P DASHER, RICHARD F 702 S. 6TH AVENUE, PO BOX 1312 WAUCHULA, FL 33863
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V REAS, MONICA 234 S. 6TH AVENUE WAUCHULA, FL 33873
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST ROLLINS, MARY 206 N. 6TH AVENUE, PO BOX 1312 WAUCHULA, FL 33873
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FLORES, OCTAVIANO R. 228 NORTH 6TH AVENUE WAUCHULA, FL 33873
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SEE, JR., JAMES V. 206 NORTH 6TH AVENUE WAUCHULA, FL 33873
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LAMBERT, DORIS S 402 S. 6TH AVENUE WAUCHULA, FL 33873

<b>DO NOT WRITE IN THIS SPACE</b>
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** By: Mary Rollins **Mary Rollins, Secretary** 3/26/2004 (863) 773-0060  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #