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1995 MAY -1 PM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT
1995

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

800001490868
-05/17/95--01054--021
DO NOT WRITE IN THIS SPACE ****260.00 ****130.00

DOCUMENT # **N94000006052 (4)**

1. Corporation Name
THE REALTORS FOUNDATION OF GREATER TAMPA, INC.

Principal Place of Business	Mailing Address
2918 W KENNDY BLVD TAMPA FL 33609	2918 W KENNDY BLVD TAMPA FL 33609

3. Date Incorporated or Qualified: 12/09/1994
3a. Date of Last Report:
4. FEI Number: [V] Applied For [ ] Not Applicable

2. Principal Place of Business
21 2918 W. Kennedy Blvd.
Suite, Apt. #, etc. 22
City & State 23 Tampa, FL
Zip 24 33609 Country 25 U.S.

2a. Mailing Address
26 2918 W. Kennedy Blvd.
Suite, Apt. #, etc. 27
City & State 28 Tampa, FL
Zip 29 33609 Country 30 U.S.

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 [ ] **$68.75** 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
PROCTOR, MARK
1367 OAKFIELD DR
BRANDON FL 33511

10. Name and Address of New Registered Agent
81 Name: Carol A. Austin
82 Street Address (P.O. Box Number is Not Acceptable): 2918 W. Kennedy Blvd.,
83
84 City: Tampa, FL **FL** 85 Zip Code: 33609

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: Carol A. Austin — Carol A. Austin — 4/4/95
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	11 TITLE	PD	[x] Change [ ] Addition
NAME	PROCTOR, MARK	12 NAME	Murray Homelsky	
STREET ADDRESS	1367 OAKFIELD DR	13 STREET ADDRESS	4529 Oak River Circle	
CITY-ST-ZIP	BRANDON FL 33511	14 CITY-ST-ZIP	Valrico, FL 33594	
TITLE	SD	21 TITLE	SD	[x] Change [ ] Addition
NAME	HUNT, BILL	22 NAME	Ted Keiser	
STREET ADDRESS	2017 BRANCHTREE LANE	23 STREET ADDRESS	2814 Manor Hill Drive	
CITY-ST-ZIP	BRANDON FL 33511	24 CITY-ST-ZIP	Brandon, FL 33511	
TITLE	TD	31 TITLE		[ ] Change [ ] Addition
NAME	STANDER, JULIA K	32 NAME		
STREET ADDRESS	4002 BAINEWOOD COURT	33 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL 33614	34 CITY-ST-ZIP		
TITLE		41 TITLE		[ ] Change [ ] Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		[ ] Change [ ] Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		[ ] Change [ ] Addition
NAME		62 NAME	2nd 5-1-95	
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 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: Julia K. Stander — 4/18/95 — (813) 888-7879
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

COR3010