## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000020345

Entity Name: FLAGLER COUNTY MULTIPLE LISTING SERVICE, INC.

FILED Feb 09, 2011 Secretary of State

Current Principal Plac	e of Business:	New Principal Place of Business:	
4101 EAST MOODY BL' BUNNELL. FL 32110	· · <del>-</del>		

Current Mailing Address: New Mailing Address:

P.O. BOX 1216

BUNNELL, FL 32110 US

FEI Number: 20-0679453 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CHIUMENTO, MICHAEL ESQ. 145 CITY PLACE SUITE 301 PALM COAST, FL 32164 US

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.

III the State of Flori

SIGNATURE:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: F

Name: KEYS, THERESE
Address: 4101 E. MOODY BLVD
City-St-Zip: BUNNELL, FL 32110 US

Title: VP

Name: RADCLIFF, KAREN
Address: 4101 E. MOODY BLVD
City-St-Zip: BUNNELL, FL 32110 US

Title: DS

Name: GARDINAL, ANNETTE
Address: 4101 E. MOODY BLVD
City-St-Zip: BUNNELL, FL 32110 US

Title: DT

 Name:
 TAYLOR, DAVE

 Address:
 4101 E. MOODY BLVD

 City-St-Zip:
 BUNNELL, FL 32110

Title: PE

Name: BONGIOVANNI, CARMEN Address: 4101 E. MOODY BLVD City-St-Zip: BUNNELL, FL 32110

Title: [

 Name:
 NIEMINEN, SCOTT

 Address:
 4101 E. MOODY BLVD

 City-St-Zip:
 BUNNELL, FL 32110

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DOROTHY DESVOUSGES SPERBER EO 02/09/2011