

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2006 8:00 am
Secretary of State

03-08-2006 90165 012 ***158.75

DOCUMENT # P05000122598

1. Entity Name
GULF COAST REGIONAL MULTIPLE LISTING SERVICE, INC.



Principal Place of Business
**2901 MANATEE AVNUE WEST
BRADENTON, FL 34205**

Mailing Address
**2901 MANATEE AVNUE WEST
BRADENTON, FL 34205**

66006928



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02162006

Chg-P

CR2E034 (11/05)

4. FEI Number

20-3787870

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**REID, EDWARD O
3633 26TH STREET WEST
BRADENTON, FL 34205**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Joan C. Olisewski

(NOTE: Registered Agent signature required when resigning)

DATE

2-28-06

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$350.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **DP** ☐ Delete
NAME **OLISEWSKI, JOAN**
STREET ADDRESS **2901 MANATEE AVNUE WEST**
CITY-ST-ZIP **BRADENTON, FL 34205**

TITLE **DV** ☒ Delete
NAME **TAYLOR KI, RICHARD**
STREET ADDRESS **2901 MANATEE AVNUE WEST**
CITY-ST-ZIP **BRADENTON, FL 34205**

TITLE **DST** ☐ Delete
NAME **FORD, DAVID**
STREET ADDRESS **2901 MANATEE AVNUE WEST**
CITY-ST-ZIP **BRADENTON, FL 34205**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **VP**
STREET ADDRESS **Parker, Lynn**
CITY-ST-ZIP **2901 Manatee Avenue, West
Bradenton, FL 34205**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 607, 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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-28-06

Date

941-747-1818

Daytime Phone #

ATTACHMENT



66006928

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 10, 2006

GULF COAST REGIONAL MULTIPLE LISTING SERVICE, INC.
2901 MANATEE AVENUE WEST
BRADENTON, FL 34205

Subject: GULF COAST REGIONAL MULTIPLE LISTING SERVICE, INC.

Reference Number: P05000122598

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$158.75; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/cj

ANNUAL REPORTS SECTION