

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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AND
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95 MAR 16 AM 11:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995

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

DOCUMENT # P93000063393 (1)

1. Corporation Name

CENTRAL FLORIDA REAL ESTATE INFORMATION SERVICE,
INC.

Principal Place of Business
621 EAST CENTRAL BLVD.
ORLANDO FL 32802

Mailing Address
621 EAST CENTRAL BLVD.
ORLANDO FL 32802

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
11/01/1993

3a. Date of Last Report
03/02/1994

4. FEI Number
59-3201224

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GREATER ORLANDO ASSOCIATION OF REALTORS
621 EAST CENTRAL BLVD.
ORLANDO FL 32802

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5

Zip Code

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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE

Belton E. Jennings III

Belton E. Jennings III, Sec'y

2/5/95

(Signature, name of registered agent and title, if applicable.)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	SABETI, MAX
NAME	4063 N. GOLDENROD RD., SUITE 208
STREET ADDRESS	WINTER PARK FL
CITY-ST-ZIP	
TITLE	D
NAME	BOEHMER, BOBBIE
STREET ADDRESS	5040 W. COLONIAL DR.
CITY-ST-ZIP	ORLANDO FL
TITLE	D
NAME	ACKER, RON
STREET ADDRESS	950 NORTH ORLANDO AVE., SUITE 150
CITY-ST-ZIP	WEST PALM BCH. FL
TITLE	D
NAME	HEATH, NED
STREET ADDRESS	625 E. COLONIAL DR.
CITY-ST-ZIP	ORLANDO FL
TITLE	D
NAME	HUSKEY, BUDGE
STREET ADDRESS	1000 WEKIVA SPRINGS ROAD
CITY-ST-ZIP	LONGWOOD FL
TITLE	D
NAME	WETNIGHT, PAT
STREET ADDRESS	190 E. MORSE BLVD
CITY-ST-ZIP	WEST PALM BEACH FL 32789

1.1 TITLE	T	☒ Change ☐ Addition
1.2 NAME	Rylands, Barbara	
1.3 STREET ADDRESS	4207 Curry Ford Road	
1.4 CITY-ST-ZIP	Orlando, FL 32806	
2.1 TITLE	C	☒ Change ☐ Addition
2.2 NAME	Carnes, Barry	
2.3 STREET ADDRESS	382 West SR 434	
2.4 CITY-ST-ZIP	Longwood, FL 32750	
3.1 TITLE	VC	☒ Change ☐ Addition
3.2 NAME	Acker, Ron	
3.3 STREET ADDRESS	950 North Orlando Ave., Suite 150	
3.4 CITY-ST-ZIP	Winter Park, FL 32789	
4.1 TITLE	S	☐ Change ☒ Addition
4.2 NAME	Jennings, Belton	
4.3 STREET ADDRESS	621 E. Central Blvd.	
4.4 CITY-ST-ZIP	Orlando, FL 32802	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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)(k), 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; that I am authorized to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13, or on an attachment with an address.

SIGNATURE

Belton E. Jennings III

Belton E. Jennings III

DATE

2/5/95 407422 5143

(Signature) (Print Name)