

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000076406

FILED
May 01, 2009
Secretary of State

Entity Name: NORTHEAST FLORIDA MULTIPLE LISTING SERVICE, INC.

Current Principal Place of Business:

7801 DEER CREEK CLUB ROAD
SUITE 1
JACKSONVILLE, FL 32256 US

New Principal Place of Business:

Current Mailing Address:

7801 DEER CREEK CLUB ROAD
SUITE 1
JACKSONVILLE, FL 32256 US

New Mailing Address:

FEI Number: 59-3210655 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MARKS, JEFFREY B
3000-8 HARTLEY RD.
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SPRAGUE, STEVE
Address: 939 HALSEMA ROAD
City-St-Zip: JACKSONVILLE, FL 32220 US

Title: VP () Delete
Name: POWELL, ROBERT
Address: 1726 KINGSLEY AVE SUITE 4
City-St-Zip: ORANGE PARK, FL 32073 US

Title: S () Delete
Name: LABLOND, CLARK
Address: 4194 SAN JUAN AVE
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: D () Delete
Name: MCMOROW, LINDA
Address: 6750 EPPING FOREST WAY N #103
City-St-Zip: JACKSONVILLE, FL 32217 US

Title: VP () Delete
Name: ROBERT, POWELL
Address: 1726 KINGSLEY AVE SUITE 4
City-St-Zip: ORANGE PARK, FL 32073 US

Title: D () Delete
Name: DEE, BUMBARGER
Address: 2635 BLUEBERR LANE
City-St-Zip: JACKSONVILLE, FL 32211 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SPRAGUE, STEVE
Address: 939 HALSEMA ROAD
City-St-Zip: JACKSONVILLE, FL 32220 US

Title: P (X) Change () Addition
Name: POWELL, ROBERT
Address: 1726 KINGSLEY AVE SUITE 4
City-St-Zip: ORANGE PARK, FL 32073 US

Title: T (X) Change () Addition
Name: LABLOND, CLARK
Address: 4194 SAN JUAN AVE
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: CLARE, BERRY
Address: 330 HIGWAY A1A SUITE 200
City-St-Zip: PONTE VEDRA, FL 32082 US

Title: S (X) Change () Addition
Name: GENE, JONES
Address: DUNN AVE. SUITE ONE
City-St-Zip: JACKSONVILLE, FL 32218 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: RON STEPHAN

EVP

05/01/2009

Electronic Signature of Signing Officer or Director

_____ Date