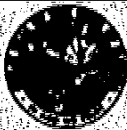


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # V05245 (8)

1. Corporation Name

LAKE COUNTY MULTIPLE LISTING SERVICE, INC.

**APPROVED
AND
FILED**

95 APR 18 PM 11:32

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/08/1992

3a. Date of Last Report

05/01/1994

4. FEI Number

59-3102177

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**

6. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

Principal Place of Business

**725 E. ALFRED STREET
TAVARES FL 32778**

Mailing Address

**P. O. BOX 1005
TAVARES FL 32778**

2. Principal Place of Business

21

Suite, Apt. #, etc.

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

City & State

27

Zip

Country

29

Zip

30

9. Name and Address of Current Registered Agent

**RODGERS, BRENDA C.
725 E. ALFRED STREET
TAVARES FL 32778**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Brenda C. Rodgers

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

4-14-95

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	LACKEY, DONALD J.
STREET ADDRESS	2835 W OLD HWY 441
CITY- ST- ZIP	MOUNT DORA FL
TITLE	VPD
NAME	SILBERNAGEL, BRIAN
STREET ADDRESS	P.O. BOX 1190
CITY- ST- ZIP	EUSTIS FL
TITLE	SD
NAME	HOTTLE, MARILYN
STREET ADDRESS	100 W 5TH AVE
CITY- ST- ZIP	MOUNT DORA FL
TITLE	TD
NAME	BROWN, WILLIAM
STREET ADDRESS	2101 S BAY ST
CITY- ST- ZIP	EUSTIS FL
TITLE	D
NAME	SPOONER, SAMUEL O.
STREET ADDRESS	550 S HIGHLAND ST
CITY- ST- ZIP	MOUNT DORA FL
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	☒ Change ☐ Addition
1.2 NAME	BRIAN SILBERNAGEL	
1.3 STREET ADDRESS	2201 SOUTH BAY STREET	
1.4 CITY- ST- ZIP	EUSTIS, FL 32726	
2.1 TITLE	VD	☒ Change ☐ Addition
2.2 NAME	ALLAN JONES	
2.3 STREET ADDRESS	135 WEST 5TH ST	
2.4 CITY- ST- ZIP	MT DORA, FL 32757	
3.1 TITLE	SD	☒ Change ☐ Addition
3.2 NAME	JEAN WILLIAMS	
3.3 STREET ADDRESS	17521 US HWY 441 STE-21	
3.4 CITY- ST- ZIP	MT DORA, FL 32757	
4.1 TITLE	D	☒ Change ☐ Addition
4.2 NAME	REBECCA J MCPHERSON	
4.3 STREET ADDRESS	2290 S BAY ST	
4.4 CITY- ST- ZIP	EUSTIS, FL 32726	
5.1 TITLE	TD	☒ Change ☐ Addition
5.2 NAME	JEAN B. KARR	
5.3 STREET ADDRESS	120 E 4TH AVE	
5.4 CITY- ST- ZIP	MT DORA, FL 32757	
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 110.07(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 or the receiver or trustee empowered to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Brian Silbernagel

SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR

4/14/95

DATE

(904) 343-3003

DAYTIME PHONE #