

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708994

Entity Name: CENTRAL PANHANDLE ASSOCIATION OF REALTORS, INC.**Current Principal Place of Business:**3009 HWY 77 SUITE L
PANAMA CITY, FL 32405**Current Mailing Address:**3009 HWY 77, SUITE L
PANAMA CITY, FL 32405 US**FEI Number: 59-1440029****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**ASHBROOK, DEBBIE
3009 HIGHWAY 77
SUITE L
PANAMA CITY, FL 32405 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.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name BASS, KATHY
Address 4708 BAYWOOD DR
City-State-Zip: LYNN HAVEN FL 32444

Title PRESIDENT
Name MCCRORY, JOHN
Address 416 TENNESSEE AVE
City-State-Zip: LYNN HAVEN FL 32444

Title PAST PRESIDENT
Name GINN, MICHELLE
Address 3302 COUNTRY CLUB DRIVE
City-State-Zip: LYNN HAVEN FL 32444

Title SECRETARY
Name HANSEN, HOLLIE
Address 5406 OLYMPIA DR
City-State-Zip: PANAMA CITY FL 32404

Title CEO
Name ASHBROOK, DEBORAH
Address 3009 HWY 77, SUITE L
City-State-Zip: PANAMA CITY FL 32405

Title DIRECTOR
Name STROUD, ANNE
Address 2500 W 26TH ST
City-State-Zip: PANAMA CITY FL 32405

Title DIRECTOR
Name COMMANDER , CHARLIE
Address 2708 HWY 77
City-State-Zip: PANAMA CITY FL 32405

Title DIRECTOR
Name RYAN, NATALIE
Address 3917 CRESCENT DR
City-State-Zip: PANAMA CITY BEACH FL 32408

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

SIGNATURE: DEBORAH ASHBROOK**CEO****01/12/2018**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title PRESIDENT ELECT
Name HARGARAY, IDA
Address 1027 NORTH BAY DRIVE
City-State-Zip: LYNN HAVEN FL 32444

Title DIRECTOR
Name MORRISON, SUSAN
Address 1550 BAKER CT
City-State-Zip: PANAMA CITY FL 32401

Title DIRECTOR
Name BORGES, STACY
Address 5251 WOODGATE WAY
City-State-Zip: MARIANNA FL 32446

Title DIRECTOR
Name DANIELS, CHRISTINA
Address 3608 WILLOW RIDGE RD
City-State-Zip: LYNN HAVEN FL 32444

Title DIRECTOR
Name ALVIS, MIKE
Address 121 N WAUKESHA STREET
City-State-Zip: BONTIFAY FL 32425