2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2014
Secretary of State
CC6348653870

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Entity Name: NAVARRE AREA BOARD OF REALTORS, INC.

Current Principal Place of Business:

1917 NAVARRE SCHOOL ROAD
NAVARRE, FL 32566

Current Mailing Address:

1917 NAVARRE SCHOOL ROAD
NAVARRE, FL 32566 US

FEI Number: 59-2561916

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHULTZ, KERRY ANNE ESQUIRE
2045 FOUNTAIN PROFESSIONAL COURT
STE # A
NAVARRE, FL 32566 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	DIRECTOR
Name	LACEY, JOSEPH
Address	1735 TWIN PINE BLVD.
City-State-Zip:	NAVARRE FL 32566

Title	TREASURER
Name	MILLER, MARK
Address	8335 MERCADO STREET
City-State-Zip:	NAVARRE FL 32566

Title	PRESIDENT
Name	VAN WAGNER, JODI
Address	7100 CLASSIC COURT
City-State-Zip:	NAVARRE FL 32566

Title	DIRECTOR
Name	WALKER, SHEILA
Address	8520 GULF BLVD. #32
City-State-Zip:	NAVARRE BEACH FL 32566

Title	SECRETARY
Name	MANKOFF, PATRICIA
Address	7012 SUMMIT DRIVE
City-State-Zip:	NAVARRE FL 32566

Title	DIRECTOR
Name	EDWARDS, ROBIN
Address	7272 JACOBS TRAIL
City-State-Zip:	NAVARRE FL 32566

Title	VP
Name	HARTLEY, ROBERT
Address	2313 HWY 87
City-State-Zip:	NAVARRE FL 32566

Title	DIRECTOR
Name	JORDAN, WANDA
Address	6904 SEA BASS CIRCLE
City-State-Zip:	NAVARRE FL 32566

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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: JODI VAN WAGNER PRESIDENT 01/09/2014

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	TUCKER, MICHELE
Address	2742 NOAH JORDAN RD.
City-State-Zip:	NAVARRE FL 32566

Title	DIRECTOR
Name	ROGERS, SUSAN
Address	7854 LOLA CIRCLE
City-State-Zip:	NAVARRE FL 32566