| Current Mai | ling Address: | | | |
|---------------------------------------------|-----------------------------------------------------------------------|-----------------------|-----------------------------------------------|----------|
| 15401 PORT WINTER GA | ER ROAD RDEN, FL 34787 US | | | |
| FEI Number: 46-5487502 | | | Certificate of Status Desired: No | |
| Name and A | ddress of Current Registered Agent: | | | |
| CULBRETH, MI 15401 PORTER WINTER GARD | | | | |
| The above named | l entity submits this statement for the purpose of changing its regis | tered office or regis | tered agent, or both, in the State of Florida | а. |
| SIGNATURE | MICHELLE CULBRETH | | (| 01/17/20 |
| | Electronic Signature of Registered Agent | | | Date |
| Officer/Dire | ctor Detail : | | | |
| Title | PRESIDENT | Title | VP | |
| Name | GIPSON, JAMES D | Name | WILLIAMS, DAVID | |
| Address | P O BOX 618172 | Address | 14639 DREAM CATCHER COURT | |
| City-State-Zip: | ORLANDO FL 32861 | City-State-Zip: | CLERMONT FL 34711 | |
| Title | 2ND VP | Title | TREASURER | |
| Name | GRAYBILL, DEIDRE | Name | CULBRETH, MICHELLE R | |
| Address | 6619 JOHN ALDEN WAY | Address | 15401 PORTER ROAD | |
| City-State-Zip: | ORLANDO FL 32818 | City-State-Zip: | WINTER GARDEN FL 32818 | |
| Title | SECRETARY | Title | VP, #3 | |
| Name | SMITH, NANETTE | Name | ROBINSON, SHERRIKA | |
| Address | 7013 WILLOWWOOD STREET | Address | 915 OASIS PALM CIRCLE #1110 | |
| | | | | |

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT# N14000004197

Entity Name: METRO ORLANDO ASSOCIATION OF REALTISTS INC.

Current Principal Place of Business:

15401 PORTER ROAD WINTER GARDEN, FL 32818

Current Mailing Address:

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: MICHELLE CULBRETH

City-State-Zip: ORLANDO FL 32818

TREASURER

City-State-Zip: OCOEE FL 34761

01/17/2020

Electronic Signature of Signing Officer/Director Detail

FILED Jan 17, 2020 **Secretary of State** 7781692341CC

2020

Date