

Information submitted via Top Hat Plan Statement Online Filing System to U. S.  
Department of Labor under 29 CFR 2520.104-23

Date Completed: 6/1/2021 5:24 PM EST

Confirmation Number: 8217

Amended Confirmation Number:

Employer Information

Name: My Florida Regional MLS, d/b/a Stellar MLS  
Address: 247 Maitland Ave #2000  
City: Altamonte Springs  
State: FL  
Zip Code: 32701

Plan Administrator Information

Name: CUNA Mutal Retirement Solutions  
Address: 1809 24th St  
City: Great Bend  
State: KS  
Zip Code: 67530  
Phone: 8002799915  
Email: Wayne.Cook@cunamutual.com

Plan Information

Employer maintains the plan or plans below primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.

ID:1	Plan Name:	My Florida Regional MLS NQDC Plan	Number of Employees: 1
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Additional Information:



U. S. Department of Labor  
Employee Benefits Security Administration  
Washington, DC 20210

This message confirms that the Department of Labor's (DOL's) Employee Benefits Security Administration (EBSA) has received the filing of your Top Hat Plan Statement. The confirmation code for your filing is 8217. When correcting errors to your filing, please use this code in your amended statement. This communication does not mean that DOL has made a determination that you are eligible to file under DOL regulation 29 CFR 2520.104-23.