

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000008687

FILED
Jan 10, 2011
Secretary of State

Entity Name: COLLATERAL EVALUATION ASSOCIATES, INC.

Current Principal Place of Business:

4457 HICKORY DRIVE
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

Current Mailing Address:

4457 HICKORY DRIVE
PALM BEACH GARDENS, FL 33418

New Mailing Address:

FEI Number: 65-0387356

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FEINSINGER, FREDERICK
4457 HICKORY DRIVE
PALM BEACH GARDENS, FL 33418 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D
Name: FEINSINGER, FREDERICK
Address: 4457 HICKORY DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: S
Name: FEINSINGER, MARGARET S
Address: 4457 HICKORY DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: V
Name: FEINSINGER, GREGORY F
Address: 172 BENT TREE DR
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: V
Name: ROBINETTE, R L
Address: 6310 FARMINGDALE DR
City-St-Zip: CHARLOTTE, NC 28212

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

SIGNATURE: FREDERICK FEINSINGER

D

01/10/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date