

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90190 025 ***150.00

DOCUMENT # P94000065266

Corporation Name TOWNSEND APPRAISALS, INC.



Principal Place of Business 8TH AVENUE SOUTH SUITE 11 NAPLES FL 34102
Mailing Address 1020 8TH AVENUE SOUTH SUITE 11 NAPLES FL 34102

DO NOT WRITE IN THIS SPACE

Principal Place of Business Suite, Apt. #, etc. City & State Zip Country
25 26 27 28 29 30

3. Date Incorporated or Qualified 08/31/1994
4. FEI Number 65-0515135 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

TOWNSEND, ROBERT N
1020 8TH AVENUE SOUTH
SUITE 11
NAPLES FL 33940

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code 34102

i. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Robert N Townsend President 4-18-99 DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
P	TOWNSEND, ROBERT B 1020 8TH AVENUE SOUTH SUITE 11 NAPLES FL 34102	1.1 TITLE	
V	TOWNSEND, BARBARA J. 1020 8TH AVE SOUTH, SUITE 11 NAPLES FL 34102	2.1 TITLE	
		3.1 TITLE	
		4.1 TITLE	
		5.1 TITLE	
		6.1 TITLE	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert N Townsend 4-18-99 (941) 435-1008 DATE Daytime Phone #

CR2E034 (11/98)