2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000000840

Entity Name: MANCUSO APPRAISAL SERVICES, INC.

FILED Jan 13, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

595 CYPRESS GARDENS BLVD
STE 320
WINTER HAVEN, FL 33880

6352 CYPRESS GARDENS BLVD
WINTER HAVEN, FL 33884

Current Mailing Address: New Mailing Address:

595 CYPRESS GARDENS BLVD STE 320 WINTER HAVEN, FL 33880 6352 CYPRESS GARDENS BLVD WINTER HAVEN, FL 33884

FEI Number: 59-3356030 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MANCUSO, NICHOLAS
595 CYPRESS GARDENS BLVD
STE 320
WINTER HAVEN, FL 33880 US

MANCUSO, NICHOLAS
6352 CYPRESS GARDENS BLVD
WINTER HAVEN, FL 33884 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: 01/13/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete Name: MANCUSO, NICHOLAS

Name: MANCUSO, NICHOLAS
Address: 595 CYPRESS GARDENS BLVD. STE 320

City-St-Zip: WINTER HAVEN, FL 33880

Title: DVS () Delete Name: MANCUSO, STACY

Address: 595 CYPRESS GARDENS BLVD. STE. 320

City-St-Zip: WINTER HAVEN, FL 33880

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition

Name: MANCUSO, NICHOLAS

Address: 6352 CYPRESS GARDENS BLVD.

City-St-Zip: WINTER HAVEN, FL 33884

Title: DVS (X) Change () Addition

Name: MANCUSO, STACY

Address: 6352 CYPRESS GARDENS BLVD. City-St-Zip: WINTER HAVEN, FL 33884

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: NICHOLAS MANCUSO DPT 01/13/2009