

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P33080

FILED  
Mar 04, 2009  
Secretary of State

Entity Name: APPRAISAL INSTITUTE, INC.

**Current Principal Place of Business:**

550 W. VAN BUREN, STE 1000  
CHICAGO, IL 60607 US

**New Principal Place of Business:**

**Current Mailing Address:**

550 W. VAN BUREN, STE 1000  
CHICAGO, IL 60607 US

**New Mailing Address:**

FEI Number: 36-3739643

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

UNITED STATES CORPORATION COMPANY  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE, FL 32301 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: P ( ) Delete  
Name: PUGH, R.WAYNE  
Address: 7423 PICARDY AVE STE F  
City-St-Zip: BATON ROUGE, LA 70808

Title: S ( ) Delete  
Name: GRUBBE, FREDERICK H  
Address: 550 W VAN BUREN ST STE 1000  
City-St-Zip: CHICAGO, IL 60607

Title: D ( ) Delete  
Name: AGNESE, RUTH  
Address: 9 E. 40TH ST  
City-St-Zip: NEW YORK, NY 10016

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: AMORIN, JIM  
Address: 7805-A BELL MOUNTAIN DRIVE  
City-St-Zip: AUSTIN, TX 79730

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: ASAY, JOHN P  
Address: 40 E. BROADWAY  
City-St-Zip: BUTTE, MT 59701

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

SIGNATURE: JENNIFER RAYBURN

ACCT

03/04/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date