

2018 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P33080

Entity Name: APPRAISAL INSTITUTE, INC.**Current Principal Place of Business:**200 W. MADISON ST
SUITE 1500
CHICAGO, IL 60606**Current Mailing Address:**200 W. MADISON ST
SUITE 1500
CHICAGO, IL 60606 US**FEI Number:** 36-3739643**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**UNITED STATES CORPORATION COMPANY
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO, SECRETARY
Name AMORIN, JIM
Address 7805-A BELL MOUNTAIN DRIVE
City-State-Zip: AUSTIN TX 78730

Title DIRECTOR
Name CAMPOS, MARY E
Address 601 UNION STREET
2000
City-State-Zip: SEATTLE WA 98101

Title VP
Name WAGNER, STEPHEN
Address 3714 LITCHFIELD PLACE
City-State-Zip: WEST LAFAYETTE IN 47906

Title DIRECTOR
Name STEINLEY, CRAIG
Address P. O. BOS 7722
City-State-Zip: RAPID CITY SD 57709

Title DIRECTOR
Name PILZ, NICHOLAS
Address 14451 CEDAR HILL DRIVE
City-State-Zip: WINTER GARDEN FL 34787

Title DIRECTOR
Name SCHWARTZ, ERIC
Address 1717 WEST LOOP SOUTH
22ND FLOOR
City-State-Zip: HOUSTON TX 77054

Title PRESIDENT
Name MURRETT, JAMES L
Address 5665 SOUTHWESTERN BLVD
BLDG 47C
City-State-Zip: HAMBURG NY 14075

Title DIRECTOR
Name BISHOP, PLEDGER M III
Address 1250 FAIRMONT AVENUE
City-State-Zip: MT. PLEASANT SC 29464

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

SIGNATURE: JIM AMORIN

CEO, SECRETARY

01/19/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	TREASURER
Name	SHERMAN, JEFFERSON L
Address	29017 CHARDON ROAD 220
City-State-Zip:	WILLOUGHBY HILLS OH 78730