

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 415949

FILED
Apr 23, 2007
Secretary of State

Entity Name: INTERCITY AUTO APPRAISAL SERVICE, INC.

Current Principal Place of Business:

5820 S. DIXIE HWY
WEST PALM BEACH, FL 33405

New Principal Place of Business:

246 ELWA PLACE
WEST PALM BEACH, FL 33405

Current Mailing Address:

5820 S. DIXIE HWY
WEST PALM BEACH, FL 33405

New Mailing Address:

P. O. BOX 6385
WEST PALM BEACH, FL 33405

FEI Number: 59-1432949

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COTTON, CARM LEE
5820 S DIXIE HWY
WEST PALM BEACH, FL 33405 US

Name and Address of New Registered Agent:

COTTON, CARM LEE
246 ELWA PLACE
WEST PALM BEACH, FL 33405 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:

04/23/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COTTON, WILLIAM,
Address: 246 ELWA PL.
City-St-Zip: WEST PALM BEACH, FL

Title: D () Delete
Name: COTTON, CARM LEE,
Address: 246 ELWA PL.
City-St-Zip: WEST PALM BEACH, FL

Title: TS () Delete
Name: COTTON, CARM LEE,
Address: 246 ELWA PL.
City-St-Zip: WEST PALM BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: COTTON, CARM LEE

TS

04/23/2007

Electronic Signature of Signing Officer or Director

Date