
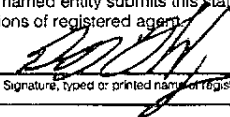
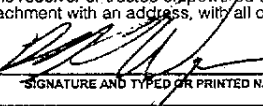


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 04, 2006 08:00 AM
Secretary of State

DOCUMENT # 430101		
1. Entity Name TUTTLE-ARMFIELD-WAGNER APPRAISAL AND RESEARCH, INC.		
Principal Place of Business 115 E. NEW HAVEN AVE. MELBOURNE, FL 32901	Mailing Address 115 E. NEW HAVEN AVE. MELBOURNE, FL 32901	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent WAGNER, RICHARD L. 115 E. NEW HAVEN AVE. MELBOURNE, FL 32901		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE:  RICHARD L. WAGNER Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) PRESIDENT DATE 5-1-06		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
		U00000562216 05/19/06-80042-024 150.00
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WAGNER, RICHARD L. 1451 ANGLERS DR NE PALM BAY, FL	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PARSONS, MARK H. 4131 ABERDEEN CIRCLE VIERA, FL 32955	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE:  RICHARD L. WAGNER SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR PRESIDENT		Date 5/1/06 Daytime Phone # 321-723-7010