2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000003446

Entity Name: NATIONWIDE APPRAISAL SERVICES CORPORATION

FILED Sep 11, 2008 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
95 WEST B SUITE 300						
WASHING1	ΓΟΝ, PA 15301					
Current Mailing Address:			New Maili	New Mailing Address:		
95 WEST BEAU ST SUITE 300 WASHINGTON, PA 15301				5600 COX ROAD GLEN ALLEN, VA 23060		
FEI Number:	25-1724847	FEI Number Applied For () FEI N	lumber Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name				me and Address of New Registered Agent:		
	DAN DNRUN WAY EZE, FL 32563	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	
		2)(b), F.S., the corporation did not receiv	e the prior notic	e.		
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title:	PCEO ()D	Delete	Title:	PD (X	() Change()Addition	
Name:	KAVANAUGH, DAN		Name:	WALKER, MARK C		
Address:	12 SHEILA CT	1. 15227	Address:	14648 N. SCOTTSDALE RD SCOTTSDALE, AZ 85104		
City-St-Zip:	PITTSBURGH, PA	(15227	City-St-Zip:	SCOTTSDALE,	, AZ 85104	
Title:	EVP ()D	Pelete	Title:	SVAS (X	() Change()Addition	
Name:	KROL, KATHLEEN		Name:	BEVERLY, MICHAEL D		
Address:	1511 PALMER DRIVE		Address:	5600 COX ROAD		
City-St-Zip:	GIBSONIA, PA 1	5044	City-St-Zip:	GLEN ALLEN, '	VA 23060	
Title:	CFOP ()D	telete	Title:	SVPT (X	() Change () Addition	
Name:	WOLFE, CAROL		Name:	RAMOS, RONA		
Address:	2749 COLE RD		Address:	5600 COX ROAD		
City-St-Zip:	WEXFORD, PA	15090	City-St-Zip:	GLEN ALLEN, '	VA 23060	
Title:	() 🗅)elete	Title:	VPS () Change (X) Addition	
Name:	() 5		Name:	KING, ANNA M		
Address:			Address:	5600 COX ROAD		
City-St-Zip:	ity-St-Zip:		City-St-Zip:	GLEN ALLEN, VA 23060		
Title:	() [Delete	Title:	AVAS () Change (X) Addition	
Name:	() L	, cioto	Name:	VAUGHAN, HO		
Address:		Address:	5600 COX ROAD			
City-St-Zip:			City-St-Zip:	GLEN ALLEN, '	VA 23060	

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: HOPE M. VAUGHAN AVAS 09/11/2008