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FILED
Jun 03 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F96000001070 (9)
1. Corporation Name
PREMIER APPRAISALS, INC.



Principal Place of Business: 100 HANNOVER PARK RD SUITE 200 ATLANTA GA 30350
Mailing Address: 100 HANNOVER PARK RD SUITE 200 ATLANTA GA 30350-7503

21	2. Principal Place of Business	26	2a. Mailing Address
	12 PERIMETER CTR EAST		12 PERIMETER CTR EAST
	SUITE 1220		SUITE 1220
	ATLANTA, GA 30346		ATLANTA, GA 30346
	30346 USA		30346 USA

3. Date Incorporated or Qualified: 03/01/1996
3a. Date of Last Report: Applied For Not Applicable
4. FEI Number: 58-1878527
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
YEARGIN, DAVID W
707 MILL CREEK RD
SUITE 300
JACKSONVILLE FL 32211

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: FL 30346

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ DATE: _____
(NOTE: Registered Agent signature required when reissuing)

12. OFFICERS AND DIRECTORS

TITLE	CS	<input checked="" type="checkbox"/> DELETE
NAME	WALLACE, R. MICHAEL	
STREET ADDRESS	100 HANNOVER PARK RD, SUITE 200	
CITY-ST-ZIP	ATLANTA GA 30350	
TITLE	VTD	<input checked="" type="checkbox"/> DELETE
NAME	WALLACE, FAYE A	
STREET ADDRESS	100 HANNOVER PARK RD, SUITE 200	
CITY-ST-ZIP	ATLANTA GA 30350	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	MATTOX, MICHAEL W	
STREET ADDRESS	100 HANNOVER PARK RD, SUITE 200	
CITY-ST-ZIP	ATLANTA GA 30350	
TITLE	D	<input type="checkbox"/> DELETE
NAME	COBB, DOUGLAS F	
STREET ADDRESS	400 W. MARKET ST, SUITE 1610	
CITY-ST-ZIP	LOUISVILLE KY 40202	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	12 PERIMETER CENTER EAST - STE 1220
34 CITY-ST-ZIP	ATLANTA, GA 30346
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	V JONATHAN R. POWELL 12 PERIMETER CENTER EAST, STE 1220
54 CITY-ST-ZIP	ATLANTA, GA 30346
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13, changed, or on an attachment, with an address.

SIGNATURE: _____

CR2E034 (9/96)