

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FLORIDA
CORPORATION
ANNUAL REPORT
1997



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

FILED
May 22 1997 8:00am
Secretary of State

DOCUMENT # G82307

(1)

LENDER'S APPRAISAL SERVICES INC.



Principal Place of Business Mailing Address
8410 N.W. 53 Terr. 8410 N.W. 53 Terr.
Suite 201 Suite 201
Miami, Florida 33166 Miami, Florida 33166

2. Filing Date	2a. Mailing Address	3. Date of Incorporation or Organization	3a. Date of Last Report
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	12/5/83	4/29/96
22. City & State	27. City & State	4. FEE Number	5. Certificate of Status Desired
23. County	28. County	59-2361341	☐ \$8.75 Additional Fee Required
24. State	29. State		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
	30. County		6. This corporation has liability for intangible tax under s. 199.052 Florida Statutes ☒ Yes ☐ No

8. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
Spencer Fox 1500 San Remo Ave. Suite 125 Coral Gables, FL 33146	81. Name SPENCER FOX 82. Street Address (P.O. Box Number is Not Acceptable) 200 S BISCAYNE BOULEVARD 83. City MIAMI 84. State FL 85. Zip Code 33131

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 of 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 *Spencer Fox* (NOTE: Registered Agent signature required when resigning) DATE 5/16/97

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE D/p/s NAME August, Karen STREET ADDRESS 5224 N.W. 89 Drive CITY-ST-ZIP Coral Springs, FL 33067	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP
TITLE VP NAME Messinger, Ira M. STREET ADDRESS 2110 N.E 207 St. CITY-ST-ZIP North Miami, Beach, FL 33179	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
TITLE VP NAME Whitley, Jr., Terrill L. STREET ADDRESS 4475 N.W. 64 St. CITY-ST-ZIP Coconut Creek, FL 33073	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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14. I, the undersigned, certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(b), Florida Statutes. I further certify that the information is based 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. I am an officer, director, or shareholder 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 Section 19.07(3)(b) of the Florida Statutes.

CR2E034 (9/96)