

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2001 8:00 am
Secretary of State

04-02-2001 90306 024 ***158.75

DOCUMENT # J00884

1. Entity Name

SUMMIT APPRAISALS INCORPORATED

Principal Place of Business

1205 HOPI DR
PRESCOTT AZ 86303
US

Mailing Address

1205 HOPI DR
PRESCOTT AZ 86303
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2639676**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FERRER, JOSE
11001 SW 50TH CT
PINECREST FL 33126

7. Name and Address of New Registered Agent

Name

FERRER, JOSE

Street Address (P.O. Box Number is Not Acceptable)

620 MADEIRA AVE

City

Coral Gables

FL

Zip Code

33134

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PDM
NAME DUDICK, DONALD A ☐ Delete
STREET ADDRESS HC30 BOX 1553, 8750 LIVE OAK
CITY-ST-ZIP PRESCOTT AZ

TITLE DST
NAME DUDICK, M. L. ☐ Delete
STREET ADDRESS HC30 BOX 1553, 8950 LIVE OAK
CITY-ST-ZIP PRESCOTT AZ

TITLE ASD ☒ Delete
NAME DUDICK, MICHAEL A.
STREET ADDRESS 106 HIGH ST
CITY-ST-ZIP BRECKENRIDGE CO

TITLE ATD ☐ Delete
NAME DUDICK, BRIAN E.
STREET ADDRESS 20818 WALLINGFORD SQ., #303
CITY-ST-ZIP STERLING VA 20165

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PDM ☒ Change ☐ Addition
NAME
STREET ADDRESS 1205 HOPI DR
CITY-ST-ZIP PRESCOTT AZ 86303

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1205 HOPI DR
CITY-ST-ZIP PRESCOTT AZ 86303

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE AS; AT; ☐ Change ☐ Addition
NAME
STREET ADDRESS 1401 S. EDGEWOOD ST # 418
CITY-ST-ZIP ARLINGTON, VA 22204

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-29-01 520778 7742

Date

Daytime Phone #

CR2E034 (10/00)