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Mar 25 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997	 FLORIDA DEPARTMENT OF STATE Sandra B. Morthoff Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # J09880

1. Corporation Name

DIRECT APPRAISAL SERVICE, INC.

Principal Place of Business

Mailing Address

9690 NW 41st STREET  
MIAMI, FL 33178

9690 NW 41st STREET  
MIAMI, FL 33178

3. Date Incorporated or Qualified

04/18/1986

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROGAN, THOMAS B.  
9690 NORTHWEST 41st STREET  
MIAMI, FL 33178

81 Name

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

83

84 City

FL

85 Zip Code

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:

1. Type or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE

D

☐ DELETE

NAME

ROGAN, THOMAS B.

STREET ADDRESS

PO BOX 52-5100 N/A

CITY-STATE-ZIP

MIAMI, FL

TITLE

P

☐ DELETE

NAME

MCCURDY, JOSEPH P.

STREET ADDRESS

PO BOX 52-5100 N/A

CITY-STATE-ZIP

MIAMI, FL

TITLE

ST

☐ DELETE

NAME

FRANCO, MARY M

STREET ADDRESS

485 DEVON PARK DR, STE 115

CITY-STATE-ZIP

WAYNE, PA

TITLE

VD

☐ DELETE

NAME

GRIBBIN, MICHAEL C.

STREET ADDRESS

9690 NW 41st ST

CITY-STATE-ZIP

MIAMI, FL

TITLE

DAS

☐ DELETE

NAME

WEAVER, GEOFFREY

STREET ADDRESS

9690 NW 41st STREET

CITY-STATE-ZIP

MIAMI, FL

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

700002123557  
-03/25/97--01051--013  
\*\*\*165.00

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 contained 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, if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/97

Daytime Phone #

CR2E034 (9/96)