2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J65744

HOMOSASSA, FL 34446

City-St-Zip:

Entity Name: ASSOCIATED REALTY & APPRAISALS, INC.

FILED Mar 17, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5449 OAK RIDGE DRIVE 4155 S SUNCOAST BLVE P.O. BOX 3180 SUITE C HOMOSASSA, FL 34448 US HOMOSASSA, FL 34448 US **Current Mailing Address: New Mailing Address:** P O BOX 3180 HOMOSASSA SPRINGS, FL 34447 US FEI Number: 59-2796226 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BARNES, CHARLES T., JR. 5449 OAKRIDGE DRIVÉ HOMOSASSA, FL 34448 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition BARNES, CHARLES T.,, JR Name: Name: 5449 OAK RIDGE DRIVE Address: Address: City-St-Zip: HOMOSASSA, FL 34448 City-St-Zip: Title: VSD () Delete Title: () Change () Addition Name: COATNEY, JASMINE B Name: 5076 W. MEADOW STREET Address: Address:

City-St-Zip:

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: CHARLES T BARNES JR PTD 03/17/2008