2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000003981

1. Entity Name

BUSÍNESS APPRAISAL SERVICES, LLC

FILED Apr 24, 2006 08:00 AN Secretary of State

Principal Place of Business 3965 ORTEGA BLVD. JACKSONVILLE, FL 32210 Mailing Address

3965 ORTEGA BLVD. JACKSONVILLE, FL 32210



DO NOT WRITE IN THIS SPACE

04202006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 30-0049992

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

R PRINTED NAME OF SIG

TANZLER, HANS G III 3264 N. COASTAL HWY VILANO BEACH, FL 32095

SIGNATURE:

DO NOT WRITE IN THIS SPACE

the obligations of registered agent.			
Old (WALLOW)	Signature, typed or printed name of registered agent and little if applicable.	(NOTE: Registered Agent signature required when remarking)	DATE
Filing Fee is \$50.00 Due by May 1, 2006			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TANZLER, HANS III 3264 N COASTAL HWY VILANO BEACH, FL 32095		U00000532846
TITLE NAME STREET ADDRESS CITY-ST-ZIP			05/06/06-80100-013 SU.W
TITLE NAME STREET ADDRESS CITY-ST-ZIP	_	DO	NOT WRITE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		. *	
TITLE NAME STREET ADDRESS CITY-SI-ZIP			
11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trastee empowered to execute this report as required by Chapter 608, Florida Statutes.			

ING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

8. The above named chirry/submits/this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, I am familiar with, and accept