

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000007747

FILED  
Aug 10, 2005  
Secretary of State

**Entity Name:** AREA REAL ESTATE APPRAISAL SERVICES, L.L.C.

**Current Principal Place of Business:**

5319 RAY DRIVE  
WEEKI WACHEE, FL 34607

**New Principal Place of Business:**

**Current Mailing Address:**

5319 RAY DRIVE  
WEEKI WACHEE, FL 34607

**New Mailing Address:**

**FEI Number:** 01-0693507      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

GRANT, MARK ANTHONY  
5319 RAY DRAIVE  
WEEKI WACHEE, FL 34607      US

**Name and Address of New Registered Agent:**

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: GRANT, MARK ANTHONY  
Address: 5319 RAY DRIVE  
City-St-Zip: WEEKI WACHEE, FL 34607

Title: MGRM (X) Delete  
Name: GRANT, HEIDI S  
Address: 5319 RAY DRIVE  
City-St-Zip: WEEKI WACHEE, FL 34607

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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 trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MARK A GRANT

MGRM

08/10/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date