

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000010772

FILED
Jun 28, 2005
Secretary of State

Entity Name: MID-FLORIDA APPRAISAL GROUP, LLC

Current Principal Place of Business:

20 W SPRUCE ST
ORLANDO, FL 32804

New Principal Place of Business:

2431 LEE ROAD
WINTER PARK, FL 32789

Current Mailing Address:

20 W SPRUCE ST
ORLANDO, FL 32804

New Mailing Address:

2431 LEE ROAD
WINTER PARK, FL 32789

FEI Number: 45-0532271 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:

CRAMER, YVONNE
3675 DERBYSHIRE RD #103
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

CRAMER, YVONNE
626 KENWICK CR
204
CASSELBERRY, FL 32707 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: YVONNE M. CRAMER

06/28/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MS. () Change (X) Addition
Name: CRAMER, YVONNE M
Address: 626 KENWICK CR #204
City-St-Zip: CASSELBERRY, FL 32707

Title: MS () Change (X) Addition
Name: RONEY, BRENDA L
Address: 20 W SPRUCE STREET
City-St-Zip: ORLANDO, FL 32804

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: YVONNE M. CRAMER

MS

06/28/2005

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