

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000024453

FILED  
Jul 06, 2006  
Secretary of State

**Entity Name:** DUFALA APPRAISAL SERVICES, LLC

**Current Principal Place of Business:**

40421 US HIGHWAY 19 N  
TARPON SPRINGS, FL 34689 US

**New Principal Place of Business:**

1201 S HIGHLAND AVE  
SUITE 10  
CLEARWATER, FL 33756 US

**Current Mailing Address:**

3439 NORTHRIDGE DRIVE  
CLEARWATER, FL 33761 US

**New Mailing Address:**

FEI Number: 35-2228400      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:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

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

DUFALA, NICOLE L MGMR  
1201 S HIGHLAND AVE  
SUITE 10  
CLEARWATER, FL 33756 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: NICOLE L DUFALA

07/06/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: DUFALA, NICOLE L  
Address: 3439 NORTHRIDGE DRIVE  
City-St-Zip: CLEARWATER, FL 33761 US

Title: MGRM ( ) Delete  
Name: DUFALA, CHRIS  
Address: 3439 NORTHRIDGE DRIVE  
City-St-Zip: CLEARWATER, FL 33761 US

**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 Chapter 119, 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: NICOLE L DUFALA

MGRM

07/06/2006

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