2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000070108

Entity Name: GOENNER APPRAISAL SERVICES, L.L.C.

FILED Feb 15, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1921 TRADE CENTER WAY #2 NAPLES, FL 34109

Current Mailing Address: New Mailing Address:

1921 TRADE CENTER WAY #2 NAPLES, FL 34109

FEI Number: 20-1690873 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:

GOENNER, JOSEPH
7060 TIMBERLAND CIRCLE
NAPLES, FL 34109 US
GOENNER, JOSEPH
1921 TRADE CENTER WAY SUITE 2
NAPLES, FL 34109 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: 02/15/2007

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES:

MANAGING MEMBERS/MANAGERS:

Fitle: MGRM () Delete Title: MGRM (X) Change () Addition

Name: GOENNER, JOSEPH Name: GOENNER, JOSEPH Address: 7060 TIMBERLAND CIRCLE Address: 1921 TRADE CENTER WAY SUITE 2

City-St-Zip: NAPLES, FL 34109 City-St-Zip: NAPLES, FL 34109

Title: MGR () Delete Title: MGR (X) Change () Addition

Name: GOENNER, KATHY Name: GOENNER, KATHY

Address: 7060 TIMBERLAND CIR Address: 1921 TRADE CENTER WAY SUITE 2

City-St-Zip: NAPLES, FL 34109 City-St-Zip: NAPLES, FL 34109

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: KATHY GONNER MGR 02/15/2007