

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000021670

FILED  
Mar 27, 2006  
Secretary of State

**Entity Name:** APPRAISAL & INSPECTION GROUP, LLC

**Current Principal Place of Business:**

15713 ACORN CIRCLE  
TAVARES, FL 32778

**New Principal Place of Business:**

29045 OLD MILL EAST  
TAVARES, FL 32778

**Current Mailing Address:**

P.O. BOX 1222  
MOUNT DORA, FL 32756

**New Mailing Address:**

**FEI Number:** 03-0556587

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMITH, RAYMIE C  
15713 ACORN CIRCLE  
TAVARES, FL 32778 US

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

SMITH, RAYMIE C  
29045 OLD MILL EAST  
TAVARES, FL 32778 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: RAYMIE SMITH

03/27/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: SMITH, RAYMIE C  
Address: P.O. BOX 1222  
City-St-Zip: MOUNT DORA, FL 32756

**ADDITIONS/CHANGES:**

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: RAYMIE SMITH

MGR

03/27/2006

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