

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000092063

FILED
Jan 18, 2006
Secretary of State

Entity Name: ALLEGRO APPRAISAL GROUP, LLC

Current Principal Place of Business:

10 HUNTER'S RUN CIRCLE
ORMOND BEACH, FL 32174

New Principal Place of Business:

829 CHICHESTER STREET
ORLANDO, FL 32803 US

Current Mailing Address:

10 HUNTER'S RUN CIRCLE
ORMOND BEACH, FL 32174

New Mailing Address:

829 CHICHESTER STREET
ORLANDO, FL 32803 US

FEI Number: 20-3494000

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURTON, DOUGLAS A
10 HUNTER'S RUN CIRCLE
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

BURTON, DOUGLAS A
829 CHICHESTER STREET
ORLANDO, FL 32803 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:

01/18/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BURTON, DOUGLAS A
Address: 10 HUNTER'S RUN CIRCLE
City-St-Zip: ORMOND BEACH, FL 32174

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BURTON, DOUGLAS A
Address: 829 CHICHESTER STREET
City-St-Zip: ORLANDO, FL 32803 US

Title: MGRM () Change (X) Addition
Name: BURTON, ALAN H
Address: 915 OCEAN SHORE BLVD. #707
City-St-Zip: ORMOND BEACH, FL 32176 US

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: DOUGLAS A. BURTON

MGRM

01/18/2006

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