2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000096066

Entity Name: ATLAS APPRAISALS, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
12808 NIGHTSHADE PLACE BRADENTON, FL 34202	15208- 17TH AVENUE EAST BRADENTON, FL 34212

Current Mailing Address:	**New Mailing Address:**
12808 NIGHTSHADE PLACE BRADENTON, FL 34202	15208- 17TH AVENUE EAST BRADENTON, FL 34212

FEI Number: 20-3689873   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:**
GOODALE, KEVIN R MRA 12808 NIGHTSHADE PLACE BRADENTON, FL 34202 US	GOODALE, KEVIN R MRA 15208- 17TH AVENUE EAST BRADENTON, FL 34212 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: KEVIN R GOODALE _____ 01/11/2008 _____

Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS: **ADDITIONS/CHANGES:**

Title:	MGR ( ) Delete	
Name:	GOODALE, KEVIN R MRA	
Address:	12808 NIGHTSHADE PLACE	
City-St-Zip:	BRADENTON, FL 34202	

Title:	MGR (X) Change ( ) Addition
Name:	GOODALE, KEVIN R MRA
Address:	15208- 17TH AVENUE EAST
City-St-Zip:	BRADENTON, FL 34212

Title:	MGRM ( ) Delete	
Name:	MCKINNEY, ROBERT	
Address:	13620 3RD AVENUE NE	
City-St-Zip:	BRADENTON, FL 34202	

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify 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: KEVIN R GOODALE _____ MGR _____ 01/11/2008 _____

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