

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000075193

FILED
Jul 14, 2007
Secretary of State

Entity Name: SUPERIOR APPRAISALS LLC

Current Principal Place of Business:

105 NW 75TH ST
STE 3
GAINESVILLE, FL 32607 16

New Principal Place of Business:

2635 SW 35 PLACE
1807
GAINESVILLE, FL 32608 16

Current Mailing Address:

105 NW 75TH ST
STE 3
GAINESVILLE, FL 32607 16

New Mailing Address:

PO BOX 357923
GAINESVILLE, FL 32635 16

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)
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:

CARON, BRADFORD P
105 NW 75TH ST
STE 3
GAINESVILLE, FL 32607 US

Name and Address of New Registered Agent:

CARON, BRADFORD P
914 NW 24 AVENUE
GAINESVILLE, FL 32609 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:

07/14/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CARON, BRADFORD P
Address: 25225 SW 18TH AVE
City-St-Zip: NEWBERRY, FL 32669

Title: MGRM () Delete
Name: RICHARDSON, SARA K
Address: 914 NW 24TH AVE
City-St-Zip: GAINESVILLE, FL 32609

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

ADDITIONS/CHANGES:

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

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

Title: MGRM () Change (X) Addition
Name: CULPEPPER, LAMAR I
Address: 2635 SW 35 PLACE, #1807
City-St-Zip: GAINESVILLE, FL 32608 16

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: SARA K RICHARDSON

MGRM

07/14/2007

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