

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000015161

FILED  
Apr 11, 2009  
Secretary of State

**Entity Name:** PROFESSIONAL APPRAISAL SERVICE OF ORLANDO, LLC

**Current Principal Place of Business:**

11501 ROBBYES DRIVE  
ORLANDO, FL 32817

**New Principal Place of Business:**

**Current Mailing Address:**

11501 ROBBYES DRIVE  
ORLANDO, FL 32817

**New Mailing Address:**

**FEI Number:** 59-3110313

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TAUL, GULNARA  
11501 ROBBYES DRIVE  
ORLANDO, FL 32817 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: TAUL, GULNARA  
Address: 4820 HALL ROAD  
City-St-Zip: ORLANDO, FL 32817

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: TAUL, GULNARA  
Address: 11501 ROBBYES DRIVE  
City-St-Zip: ORLANDO, FL 32817

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: GULNARA TAUL

MGR

04/11/2009

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