

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000013376

**FILED**  
**May 05, 2010**  
**Secretary of State**

**Entity Name:** PARKER APPRAISAL GROUP, LLC

**Current Principal Place of Business:**

MICHELLE PARKER  
177 FRANCES CIRCLE  
ALTAMONTE SPRINGS, FL 32701

**New Principal Place of Business:**

MICHELLE PARKER  
553 KAREN AVE  
ALTAMONTE SPRINGS, FL 32701

**Current Mailing Address:**

MICHELLE PARKER  
177 FRANCES CIRCLE  
ALTAMONTE SPRINGS, FL 32701

**New Mailing Address:**

MICHELLE PARKER  
553 KAREN AVE  
ALTAMONTE SPRINGS, FL 32701

**FEI Number:** 20-0502801      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
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:**

PARKER, MICHELLE  
177 FRANCES CIRCLE  
ALTAMONTE SPRINGS, FL 32701      US

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

PARKER, MICHELLE  
553 KAREN AVE.  
ALTAMONTE SPRINGS, FL 32701      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: MICHELLE PARKER

05/05/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: PARKER, MICHELLE R OWNER  
Address: 553 KAREN AVE.  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

I hereby 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: MICHELLE R. PARKER

OWNE

05/05/2010

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