

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000057972

**FILED**  
**Apr 16, 2012**  
**Secretary of State**

**Entity Name:** ALLIANCE APPRAISING LLC

**Current Principal Place of Business:**

5099 SE CR 337  
NEWBERRY, FL 32669

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1368  
NEWBERRY, FL 32669

**New Mailing Address:**

**FEI Number:** 80-0736267      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

WHITE, JANET S  
5099 SE CR 337  
NEWBERRY, FL 32669      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:** MGRM  
**Name:** WHITE, JANET S  
**Address:** 5099 SE CR 337  
**City-St-Zip:** NEWBERRY, FL 32669

**Title:** MGRM  
**Name:** TAYLOR, AMANDA M  
**Address:** 6919 SE 55TH STREET  
**City-St-Zip:** TRENTON, FL 32693

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:** AMANDA TAYLOR

MGRM

04/16/2012

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