

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Jan 21 1997 8:00am  
Secretary of StatePROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # L35406

(2)

1. Corporation Name

CERTIFIED APPRAISERS, INC.

Principal Place of Business

3000 GULF TO BAY BLVD.  
SUITE 500  
CLEARWATER FL 34619

Mailing Address

931 SPANISH OAKS BLVD  
PALM HARBOR FL 34683-6634  
US

3. Date Incorporated or Qualified

12/11/1989

3a. Date of Last Report

02/02/1996

4. FEI Number

59-2982300

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution☐ \$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes☐ Yes ☐ No

2. Principal Place of Business

21

Suite Apt. # etc.

22

City &amp; State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City &amp; State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

HORMES, RONALD C.  
931 SPANISH OAKS BLVD.  
PALM HARBOR FL 34683

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE STD ☐ DELETE  
NAME HORMES, CHERYL L  
STREET ADDRESS 931 SPANISH OAKS BLVD  
CITY-ST-ZIP PALM HARBOR FLTITLE PD ☐ DELETE  
NAME HORMES, RONALD C  
STREET ADDRESS 931 SPANISH OAKS BLVD  
CITY-ST-ZIP PALM HARBOR FLTITLE VP ☐ DELETE  
NAME SETTLEMYRE, THOMAS P  
STREET ADDRESS 307 ARCHER ST  
CITY-ST-ZIP TAMPA FLTITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

Cheryl L. Hormes, Cheryl L. Hormes, Treas. 1/15/97 813-724-8187

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (9/96)