

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L49779

FILED  
Feb 27, 2011  
Secretary of State

Entity Name: ELDRIDGE APPRAISALS, INC.

**Current Principal Place of Business:**

% ELDRIDGE APPRAISALS, INC.  
1839 IMPERIAL GOLF COURSE BLVD  
NAPLES, FL 34110 US

**New Principal Place of Business:**

**Current Mailing Address:**

% ELDRIDGE APPRAISALS, INC.  
1839 IMPERIAL GOLF COURSE BLVD  
NAPLES, FL 34110 US

**New Mailing Address:**

FEI Number: 65-0181477

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ELDRIDGE, DAVID C  
1839 IMPERIAL GOLF COURSE BLVD  
NAPLES, FL 34110 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

**OFFICERS AND DIRECTORS:**

Title: P D  
Name: ELDRIDGE, DAVID C  
Address: 1839 IMPERIAL GOLF COU  
City-St-Zip: NAPLES, FL 34110

Title: S D  
Name: ELDRIDGE, SUZANNE H  
Address: 1839 IMPERIAL GOLF COU  
City-St-Zip: NAPLES, FL 34110

Title: VP D  
Name: ELDRIDGE, MORGAN W  
Address: 4626 SIERRA LANE  
City-St-Zip: BONITA SPRINGS, FL 34134

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: DAVID C. ELDRIDGE

PD

02/27/2011

Electronic Signature of Signing Officer or Director

Date