

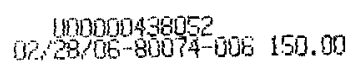


Feb 17,
Secr

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # L99990		
1. Entity Name FROST APPRAISAL & MARKET CONSULTANTS, INC.		
Principal Place of Business 26133 U.S. HWY. 19 N. 302 CLEARWATER, FL 33763 US		Mailing Address 26133 U.S. HWY. 19 N. 302 CLEARWATER, FL 33763 US
DO NOT WRITE IN THIS SPACE		
		 01112006 No Chg-P CR2E034 (11/05)
		4. FEI Number 59-3034575
		Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent		
FROST, KENNETH L 26133 U.S. HWY 19 NORTH SUITE 302 CLEARWATER, FL 33763		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST FROST, L. KENNETH 2718 ASHWOOD COURT CLEARWATER, FL 33761	 UN00000438052 02/28/06-80074-006 150.00 DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>L. KENNETH FROST</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		2/14/06 727 797 8997 Date Daytime Phone #