

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000001077

Entity Name: VALUATION ASSOCIATES, LLC

FILED  
Jan 23, 2007  
Secretary of State

## Current Principal Place of Business:

2533 NORTH CARSON STREET  
CARSON CITY, NV 89706

## New Principal Place of Business:

15 NE 4TH STREET  
SUITE D  
DELRAY BEACH, FL 33444

## Current Mailing Address:

2533 NORTH CARSON STREET  
CARSON CITY, NV 89706

## New Mailing Address:

15 NE 4TH STREET  
SUITE D  
DELRAY BEACH, FL 33444

FEI Number: 04-3772125

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

PACKER, MARY  
15 NE 4TH STREET STE D  
DELRAY BEACH, FL 33444 US

## Name and Address of New Registered Agent:

PACKER, MARY  
15 NE 4TH STREET  
SUITE D  
DELRAY BEACH, FL 33444 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:

01/23/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: FULLER, ROBERT  
Address: 90 CRUSHER RD  
City-St-Zip: HOPEWELL, NJ 08525

Title: MGR ( ) Delete  
Name: RITTENHOUSE, TIMOTHY  
Address: 2 CRAMPTON RD  
City-St-Zip: BRONXVILLE, NY 10708

Title: MGR ( ) Delete  
Name: PACKER, MARY  
Address: 22710 EL DORADO DRIVE  
City-St-Zip: BOCA RATON, FL 33433

Title: MGR ( ) Delete  
Name: KISS, JEFFREY  
Address: 1381 SAWGRASS CT  
City-St-Zip: WINTER PARK, FL 32792

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: MARY A. PACKER

MGR

01/23/2007

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