

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **M45189** (1)

1. Corporation Name  
**APPRAISALFIRST, INC.**



Principal Place of Business  
**C/O EARLE A. GIDDENS  
8390 N.W. 53RD ST., STR. 201  
MIAMI FL 33166**

Mailing Address  
**C/O EARLE A. GIDDENS  
8390 N.W. 53RD ST., STR. 201  
MIAMI FL 33166**

3. Date Incorporated or Qualified **01/21/1987** 3a. Date of Last Report **02/13/1995**

2. Principal Place of Business	2a. Mailing Address	4. FEI Number <b>59-2769553</b>	Applied For <input type="checkbox"/> Not Applicable
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
22. City & State	27. City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
23. Zip	28. Zip	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
24. Country	29. Country		

9. Name and Address of Current Registered Agent

**GIDDENS, EARLE A.  
8390 NW 53RD ST., #201  
MIAMI FL 33166**

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. State	<b>FL</b>
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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PM	1.1 TITLE	PM
NAME	<b>GAMBLE, RICHARD D.</b>	1.2 NAME	<b>GAMBLE, RICHARD D.</b>
STREET ADDRESS	<b>2603 MAITLAND CENTER PARKWAY, STE C</b>	1.3 STREET ADDRESS	<b>222 SOUTH WESTMONTE DRIVE, STE. 116</b>
CITY - ST - ZIP	<b>MAITLAND FL</b>	1.4 CITY - ST - ZIP	<b>ALTAMONTE SPRINGS, FLORIDA 32714</b>
TITLE	VCM	2.1 TITLE	
NAME	<b>GIDDENS, EARLE A.</b>	2.2 NAME	
STREET ADDRESS	<b>8390 NW 53RD ST., #201</b>	2.3 STREET ADDRESS	
CITY - ST - ZIP	<b>MIAMI FL</b>	2.4 CITY - ST - ZIP	
TITLE	VSTM	3.1 TITLE	
NAME	<b>MAYHEW, PAUL</b>	3.2 NAME	
STREET ADDRESS	<b>8390 NW 53RD STREET, STE 201</b>	3.3 STREET ADDRESS	
CITY - ST - ZIP	<b>MIAMI FL</b>	3.4 CITY - ST - ZIP	
TITLE	M	4.1 TITLE	
NAME	<b>HALL, CAROL</b>	4.2 NAME	
STREET ADDRESS	<b>8390 NW 53RD ST., #201</b>	4.3 STREET ADDRESS	
CITY - ST - ZIP	<b>MIAMI FL</b>	4.4 CITY - ST - ZIP	
TITLE	D	5.1 TITLE	
NAME	<b>CHAPMAN, ROWLAND</b>	5.2 NAME	
STREET ADDRESS	<b>8390 NW 53RD ST., #201</b>	5.3 STREET ADDRESS	
CITY - ST - ZIP	<b>MIAMI FL</b>	5.4 CITY - ST - ZIP	
TITLE	D	6.1 TITLE	
NAME	<b>GOODMAN, RICHARD I</b>	6.2 NAME	
STREET ADDRESS	<b>8070 NW 53RD STREET, STE. 105</b>	6.3 STREET ADDRESS	
CITY - ST - ZIP	<b>MIAMI FL</b>	6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Earle A. Giddens*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/12/96 305-470-2100  
Date Daytime Phone #

CR2E034 (12/95)