## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## Mar 20, 2006 08:00 AM **DOCUMENT # M82125 Secretary of State** 1. Entity Name ELECTRONIC CONSULTANTS AND APPRAISERS, INC. Principal Place of Business Mailing Address 10620 NW 39TH ST 10620 NW 39TH ST 10620 N. W. 39TH ST CORAL SPRINGS, FL 33065 CORAL SPRINGS, FL 33065 01072006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0049957 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent BRANGAN, W. JAMES JR. DO NOT WRITE 10620 NW 39TH ST. POMPANO BEACH, FL 33065 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\_ Signature, typed or printed name of registered agent and tills if applicable (NOTE: Registered Agent signature required when reinstering) DATE \$5.00 May 8e a. Election Campaign Financing FILE NOWIN FEE 18 \$150.00 After May 1, 2006 Fee will be \$550.00 П Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE BRANGAN, W. JAMES JR. NAME STREET ADDRESS 10620 NW 39TH ST CITY-ST-ZIP CORAL SPRINGS, FL 33065 TITLE NAME BRANGAN, MARCIA E. STREET ADDRESS 10620 NW 39TH ST 400000473104 CITY-ST-ZIP CORAL SPRINGS, FL 33065 /13/31/06 60004-001 150.00 TITLE STREET AUDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TALE NAME STREET ADDRESS

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or suppliemental report is true and execurate and that my signature shall have the same legal effect as it made under ceth; that I am an officer or director of the composition 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: 1

City-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP TITLE

W. James Brangan, Jr.

President

954-345-9544

ent 01/12/06

FILED