


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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**FILED**  
**Apr 27, 2007 8:00 am**  
**Secretary of State**

04-09-2007 90076 015 \*\*\*\*61.25

<b>DOCUMENT # N06000005498</b>					
1. Entity Name <b>SOUTH FLORIDA/GREATER MIAMI CHAPTER OF THE INTERNATIONAL SOCIETY OF APPRAISERS, INC.</b>					
Principal Place of Business <b>UNITED APPRAISAL GROUP 3079 NE 183RD LANE AVENTURA, FL 33160</b>			Mailing Address <b>UNITED APPRAISAL GROUP 3079 NE 183RD LANE AVENTURA, FL 33160</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number	
				04022007 Chg-NP CR2E037 (12/06)	
5. Certificate of Status Desired <input type="checkbox"/>				<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>CAPODILUPO, ANTHONY</b> <b>4598 NW 26 AVENUE</b> <b>BOCA RATON, FL 33434</b>				Name <u>Dorothy Hong</u> Street Address (P.O. Box Number is Not Acceptable) <u>101 SE 6th St</u> <u>FL Hialeahdale</u> City <u>FL Hialeahdale</u> <b>FL</b> Zip Code <u>33301</u>	
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 <u>Dorothy Hong</u> DATE <u>4/24/07</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be</b> <b>Added to Fees</b>	
		Make check payable to <b>Florida Department of State</b>			
10. OFFICERS AND DIRECTORS					
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP		
	<u>President</u>				
	<u>Jay Bester</u>	<u>12555 Biscayne Blvd -</u>	<u>Miami, FL 33181</u>	<input type="checkbox"/> Delete	
	<u>VP</u>				
	<u>Monica Fidel</u>	<u>1018 SW 43rd Ave</u>	<u>Miami, FL 33134</u>	<input type="checkbox"/> Delete	
	<u>Secretary</u>				
	<u>Robert A. Hill</u>	<u>3020 N. Federal Hwy #6</u>	<u>FL Hialeahdale, FL 33306</u>	<input type="checkbox"/> Delete	
	<u>Treasurer</u>				
	<u>Dorothy Hong</u>	<u>101 SE 6th St</u>	<u>FL Hialeahdale, FL 33301</u>	<input type="checkbox"/> Delete	
				<input type="checkbox"/> Delete	
				<input type="checkbox"/> Delete	
				<input type="checkbox"/> Delete	
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
				<input type="checkbox"/> Change <input type="checkbox"/> Addition	

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 617, 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.

Dorothy Hong Treasurer