

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000020317

**FILED**  
**Jan 30, 2005**  
**Secretary of State**

**Entity Name:** BLUE RIBBON APPRAISALS, INC.

**Current Principal Place of Business:**

6530 OLDE MOAT WY  
DAVIE, FL 33331

**New Principal Place of Business:**

649 E. SHERIDAN ST.  
APT. 209  
DANIA BEACH, FL 33004

**Current Mailing Address:**

6530 OLDE MOAT WY  
DAVIE, FL 33331

**New Mailing Address:**

PO BOX 1316  
DANIA BEACH, FL 33004

**FEI Number:** 65-1089275

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WEEKLEY, RACHEL  
6530 OLDE MOAT WY  
DAVIE, FL 33331 US

**Name and Address of New Registered Agent:**

DUNLAP, SHELLEY A  
649 E. SHERIDAN ST.  
APT. 209  
DANIA BEACH, FL 33004 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: SHELLEY A. DUNLAP

01/30/2005

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: WEEKLEY, RACHEL  
Address: 6530 OLDE MOAT WY  
City-St-Zip: DAVIE, FL 33331

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P,S (X) Change ( ) Addition  
Name: DUNLAP, SHELLEY A  
Address: 649 E. SHERIDAN ST., APT. 209  
City-St-Zip: DANIA BEACH, FL 33004

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHELLEY A. DUNLAP

PRES

01/30/2005

Electronic Signature of Signing Officer or Director

Date