

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 31, 2008 08:00 AM
Secretary of State

DOCUMENT # P01000039811 1. Entity Name ELECTRONIC APPRAISER, INC.	
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Principal Place of Business 2200 N FEDERAL HWY, SUITE 203 BOCA RATON, FL 33431	Mailing Address 2200 N FEDERAL HWY, SUITE 203 BOCA RATON, FL 33431
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03262008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1105362	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent VALES-FAULI CORPORATE SERVICES, INC. 777 S. FLAGLER DRIVE SUITE 500 EAST WEST PALM BEACH, FL 33401
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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 _____ (NOTE: Registered Agent signature required when re-issuing) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PSD SULLIVAN, GREGORY M 2200 N FEDERAL HWY, SUITE 203 BOCA RATON, FL 33431
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VTD MUTTILLO, DOMINIC A 2200 N FEDERAL HWY, SUITE 203 BOCA RATON, FL 33431
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04/10/08-80077-005 150.00

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 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 approvals.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR