

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000000866

**FILED**  
**Apr 14, 2007**  
**Secretary of State**

**Entity Name:** HERITAGE APPRAISAL GROUP, INC.

**Current Principal Place of Business:**

5357 PALOS VERDES DR  
SARASOTA, FL 34231

**New Principal Place of Business:**

**Current Mailing Address:**

5357 PALOS VERDES DR  
SARASOTA, FL 34231

**New Mailing Address:**

FEI Number: 30-0001102

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WILLETT, MARK R  
5357 PALOS VERDES DR  
SARASOTA, FL 34231 US

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

WILLETT, MARK R PRES  
5357 PALOS VERDES DR  
SARASOTA, FL 34231 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: MARK R. WILLETT

04/14/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: WILLETT, MARK  
Address: 5357 PALOS VERDES DR  
City-St-Zip: SARASOTA, FL 34231

Title: TD ( ) Delete  
Name: WILLETT, REMLE C  
Address: 3417 FAIRVIEW DR  
City-St-Zip: SARASOTA, FL 34239

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

Title: PD (X) Change ( ) Addition  
Name: WILLETT, MARK R PRES  
Address: 5357 PALOS VERDES DR  
City-St-Zip: SARASOTA, FL 34231

Title: TD (X) Change ( ) Addition  
Name: WILLETT, REMLE C TREAS  
Address: 3417 FAIRVIEW DR  
City-St-Zip: SARASOTA, FL 34239

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: REMLE C. WILLETT

TREA

04/14/2007

Electronic Signature of Signing Officer or Director

Date