

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000007868

FILED
Feb 17, 2005
Secretary of State

Entity Name: PREMIER APPRAISAL COMPANY OF NORTH FLORIDA, INC.

Current Principal Place of Business:

1400 METROPOLITAN BLVD.
SUITE 216
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 14736
TALLAHASSEE, FL 32317

New Mailing Address:

FEI Number: 75-2970407

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVER, KEVIN H
1400 METROPOLITAN BLVD.
SUITE 216
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SILVER, KEVIN
Address: 1400 METROPOLITAN BLVD., STE 216
City-St-Zip: TALLAHASSEE, FL 32308

Title: VP () Delete
Name: WHITTINGTON, MARK
Address: 1400 METROPOLITAN BLVD., STE 216
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: KEVIN SILVER

P

02/17/2005

Electronic Signature of Signing Officer or Director

Date