

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 19, 2003 8:00 am
Secretary of State

05-19-2003 90206 043 ***150.00

0408326 AV

DOCUMENT # P02000068038

1. Entity Name
RS APPRAISAL INC.



Principal Place of Business
9389 LONG MEADOW CIRCLE
BOYNTON BEACH FL 33436

Mailing Address
9389 LONG MEADOW CIRCLE
BOYNTON BEACH FL 33436



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

☐ Applied For
☒ Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

STICKNEY, RYAN
9389 LONG MEADOW CIRCLE
BOYNTON BEACH FL 33436

7. Name and Address of New Registered Agent

Name Same
Street Address (P.O. Box Number is Not Acceptable)

City 8 **FL** Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **STICKNEY, RYAN**
STREET ADDRESS **9389 LONG MEADOW CIRCLE**
CITY-ST-ZIP **BOYNTON BEACH FL 33436**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
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TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

Attachment

90136308
P02000068038

Hello,

I am writing this letter to inform you that, I spoke to someone in your office and explained why I was late getting my filing fee in before the due date of may 1, 2003. And the person that i spoke to said it would be ok to send the \$150.00 if I wrote a letter and explained why I was late.

The reason for me being late was due to my bank account being overdrawl of which I was not at fault. My bank has now just got everything strightend out. I sent this check as sone as I could, without bouncing another check. please take this in to consideration.

Thanks For Everything
Ryan P. Stickney