2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000073672

Entity Name: D & D APPRAISAL SERVICES, INC.

FILED Jun 21, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Julicut i illicipui i luce di Busiliess.	New i interput i luce of Business.

3802 EHRLICH ROAD SUITE 307 3802 EHRLICH ROAD TAMPA, FL 33624 **STE 307**

TAMPA, FL 33624

Current Mailing Address: New Mailing Address:

3803 EHRLICH RD P.O. BOX 152779 TAMPA, FL 336842779 STE 307 TAMPA, FL 33624

FEI Number: 22-3860742 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HOLLISTER, WILLIAM S CRUZ, GENEROSA 8001 N. DALE MABRY HWY 3802 EHRLICH RD SUITE 501M STE 307 TAMPA, FL 33614 US TAMPA, FL 33624 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.

Title:

SIGNATURE: GENEROSA CRUZ 06/21/2005 Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

() Delete

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

Date

Title: () Delete Title: (X) Change () Addition HOLLISTER, DENNIS NORCROSS, KATHERINE Name: Name: 4302 CLAVERTON COURT 3802 EHRLICH RD STE 307 Address: Address:

City-St-Zip: TAMPA, FL 33624 City-St-Zip: TAMPA, FL 33624

HOLLISTER, DAVID Name: Name: CRUZ. GENEROSA 4302 CLAVERTON COURT 3802 EHRLICH RD STE 307 Address: Address: TAMPA, FL 33624 TAMPA, FL 33624 City-St-Zip: City-St-Zip:

Title: () Delete Title: () Change (X) Addition

Name: HOLLISTER, DAVID S Name: 3802 EHRLICH RD STE 307 Address: Address: City-St-Zip: City-St-Zip: TAMPA, FL 33624

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: DAVID HOLLISTER 06/21/2005 D