2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2009
Secretary of State

DOCUMENT# P02000078930

Entity Name: MARQUIS APPRAISALS, INC.

Current Principal Place of Business:

4657 GULF BREEZE PKWY
C
GULF BREEZE, FL 32563

New Principal Place of Business:

6434 EAST BAY BLVD.
GULF BREEZE, FL 32563

Current Mailing Address:

6434 EAST BAY BLVD
GULF BREEZE, FL 32563

New Mailing Address:

6434 EAST BAY BLVD.
GULF BREEZE, FL 32563

FEI Number: 36-4502765 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARQUIS, J.E.
6434 EAST BAY BLVD
GULF BREEZE, FL 32563 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: PST ( ) Delete
Name: MARQUIS, J.E.
Address: 6434 EAST BAY BLVD
City-St-Zip: GULF BREEZE, FL 32563

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S/T ( ) Change (X) Addition
Name: MARQUIS, SHIRLEY A
Address: 6434 EAST BAY BLVD
City-St-Zip: GULF BREEZE, FL 32563

I hereby certify that the information supplied with this filing does not qualify 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: SHIRLEY A. MARQUIS S/T 03/25/2009

Electronic Signature of Signing Officer or Director — Date