

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000001425

Entity Name: BILLIE NEWELL APPRAISER, INC.

FILED  
Apr 30, 2009  
Secretary of State

## Current Principal Place of Business:

991 APRIL LN  
FT MYERS, FL 33903

## New Principal Place of Business:

## Current Mailing Address:

991 APRIL LN  
FT MYERS, FL 33903

## New Mailing Address:

FEI Number: 56-2309809

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NEWELL, BILLIE  
991 APRIL LANE  
NORTH FORT MYERS, FL 33903 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: PSTD ( ) Delete  
Name: NEWELL, BILLIE  
Address: 991 APRIL LN  
City-St-Zip: FT MYERS, FL 33903

Title: VD (X) Delete  
Name: NEWELL, WILLIAM  
Address: 991 APRIL LN  
City-St-Zip: FT MYERS, FL 33903

## 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 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: BILLIE A. NEWELL

PSTD

04/30/2009

Electronic Signature of Signing Officer or Director

Date