2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000090099

Entity Name: KARILEE APPRAISALS, INC.

FILED Apr 13, 2005 Secretary of State

Lineity Ivai	ille. IV-IVILLE	. ALTIVAIOALO, INO.				
Current Principal Place of Business:			New Prince	New Principal Place of Business:		
	.OW GROVE AGES, FL 321			LOW GROVE W AGES, FL 32162		
Current M	lailing Addre	ss:	New Maili	New Mailing Address:		
2176 WILLOW GROVE WAY THE VILLAGES, FL 32162				2176 WILLOW GROVE WAY THE VILLAGES, FL 32162 US		
FEI Number:	: 37-1473789	FEI Number Applied For ()	FEI Number Not App	olicable ()	Certificate of Status Desire	d()
Name and	Address of (Current Registered Agent:	Name and Address of New Registered Agent:			
THE VILLA The above	.OW GROVE AGES, FL 321		purpose of changing	its registered off	ice or registered agent,	or both,
SIGNATUR	RE:					
	Electro	nic Signature of Registered A	gent		Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PSTD (LEE, RICHARI 2176 WILLOW THE VILLAGES	GROVE WAY	Title: Name: Address: City-St-Zip:	()(Change () Addition	
Title: Name: Address: City-St-Zip:	D (LEE, KATHLEE 2176 WILLOW THE VILLAGES	GROVE WAY	Title: Name: Address: City-St-Zip:	ST (X) (LEE, KATHLEEN 2176 WILLOW G THE VILLAGES, I		

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: KATHLEEN LEE ST 04/13/2005