

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000091758

**FILED**  
**Apr 29, 2008**  
**Secretary of State**

**Entity Name:** POWELL RESIDENTIAL APPRAISAL SERVICE, INC.

**Current Principal Place of Business:**

227 MORNING GLORY DRIVE  
LAKE MARY, FL 32746

**New Principal Place of Business:**

4044 W. LAKE MARY BLVD.  
SUITE 104-242  
LAKE MARY, FL 32746

**Current Mailing Address:**

PO BOX 951214  
LAKE MARY, FL 32795

**New Mailing Address:**

4044 W. LAKE MARY BLVD.  
SUITE 104-242  
LAKE MARY, FL 32746

**FEI Number:** 54-2122524

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

SMALL BUSINESS RESOURCES USA, INC.  
1601 PARK CENTER DR.  
SUITE 6A  
ORLANDO, FL 32835 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.

**SIGNATURE:** JAMES K. DUERR, CPA

04/29/2008

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PSTD ( ) Delete  
**Name:** POWELL, JOYCE S  
**Address:** 227 MORNING GLORY DRIVE  
**City-St-Zip:** LAKE MARY, FL 32746

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** PSTD (X) Change ( ) Addition  
**Name:** POWELL, JOYCE S  
**Address:** 4044 W. LAKE MARY BLVD., STE. 104-242  
**City-St-Zip:** LAKE MARY, FL 32746

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:** JOYCE S. POWELL

PSTD

04/29/2008

Electronic Signature of Signing Officer or Director

Date