

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000107269

Entity Name: BYERS APPRAISALS, INC.

FILED
Mar 30, 2004
Secretary of State

Current Principal Place of Business:

324 REGAL PARK DR
VALRICO, FL 33594 US

New Principal Place of Business:

Current Mailing Address:

324 REGAL PARK DR
VALRICO, FL 33594 US

New Mailing Address:

FEI Number: 20-0261558

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BYERS, COTY
324 REGAL PARK DR
VALRICO, FL 33594 US

Name and Address of New Registered Agent:

BYERS, COTY R
324 REGAL PARK DR
VALRICO, FL 33594 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: COTY R. BYERS

03/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BYERS, KARA
Address: 324 REGAL PARK DR
City-St-Zip: VALRICO, FL 33594 US

Title: VP () Delete
Name: REGISTER, BRUCE
Address: 2822 CEDARRIDGE DR
City-St-Zip: TAMPA, FL 33618 US

Title: S/T () Delete
Name: BYERS, COTY
Address: 324 REGAL PARK DR
City-St-Zip: VALRICO, FL 33594

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BYERS, KARA L
Address: 324 REGAL PARK DR
City-St-Zip: VALRICO, FL 33594 US

Title: VP (X) Change () Addition
Name: REGISTER, BRUCE C
Address: 2822 CEDARRIDGE DR
City-St-Zip: TAMPA, FL 33618 US

Title: S/T (X) Change () Addition
Name: BYERS, COTY R
Address: 324 REGAL PARK DR
City-St-Zip: VALRICO, FL 33594

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: COTY R. BYERS

S/T

03/30/2004

Electronic Signature of Signing Officer or Director

Date