

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000114841

FILED
Apr 27, 2006
Secretary of State

Entity Name: A QUALITY-ONE APPRAISAL SERVICE CORP

Current Principal Place of Business:

12004 COLONIAL ESTATES LANE
RIVERVIEW, FL 33569 US

New Principal Place of Business:

Current Mailing Address:

5408 ST JAMES DRIVE
NEW PORT RICHEY, FL 34652

New Mailing Address:

12004 COLONIAL ESTATES LANE
RIVERVIEW, FL 33569

FEI Number: 20-1457483

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DREW, KELLY
5408 ST JAMES DRIVE
NEW PORT RICHEY, FL 34652 US

Name and Address of New Registered Agent:

GIBBONS, TREENA
12004 COLONIAL ESTATES LANE
RIVERVIEW, FL 33569 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: TREENA M. GIBBONS

04/27/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P,T () Delete
Name: GIBBONS, TREENA
Address: 12004 COLONIAL ESTATES LANE
City-St-Zip: RIVERVIEW, FL 33569 US

Title: VP,S () Delete
Name: GIBBONS, JEREMY
Address: 12004 COLONIAL ESTATES LANE
City-St-Zip: RIVERVIEW, FL 33569 US

Title: D () Delete
Name: GIBBONS, TREENA
Address: 12004 COLONIAL ESTATES LANE
City-St-Zip: RIVERVIEW, FL 33569 US

Title: D (X) Delete
Name: GIBBONS, JEREMY
Address: 12004 COLONIAL ESTATES LANE
City-St-Zip: RIVERVIEW, FL 33569 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: GIBBONS, TREENA
Address: 12004 COLONIAL ESTATES LANE
City-St-Zip: RIVERVIEW, FL 33569 US

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 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: TREENA GIBBONS

P

04/27/2006

Electronic Signature of Signing Officer or Director

Date