2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 08, 2009
Secretary of State

DOCUMENT# P05000084843

Entity Name: DA APPRAISALS, P.A.

Current Principal Place of Business:

9340 LOS ALISOS WAY
FT MYERS, FL 33908

New Principal Place of Business:

3018 ROUND TABLE COURT
NAPLES, FL 34112

Current Mailing Address:

9340 LOS ALISOS WAY
FT MYERS, FL 33908

New Mailing Address:

3018 ROUND TABLE COURT
NAPLES, FL 34112

FEI Number: 20-2999787 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ASHCROFT, DAVID M
9340 LOS ALISOS WAY
FT MYERS, FL 33908 US

Name and Address of New Registered Agent:

ASHCROFT, DAVID M
3018 ROUND TABLE COURT
NAPLES, FL 34112 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: DAVID ASHCROFT 06/08/2009
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: ASHCROFT, DAVID M
Address: 9340 LOS ALISOS WAY
City-St-Zip: FT MYERS, FL 33908

Title: D ( ) Delete
Name: ASHCROFT, AMBER D
Address: 9340 LOS ALISOS WAY
City-St-Zip: FT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: ASHCROFT, DAVID M
Address: 3018 ROUND TABLE COURT
City-St-Zip: FT MYERS, FL 34112

Title: D (X) Change ( ) Addition
Name: ASHCROFT, AMBER D
Address: 3018 ROUND TABLE COURT
City-St-Zip: NAPLES, FL 34112

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: DAVID ASHCROFT D 06/08/2009
Electronic Signature of Signing Officer or Director Date