

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000022167

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Entity Name:** 1ST RATE APPRAISAL SERVICES, INC.

**Current Principal Place of Business:**

10716 99TH PL N  
SEMINOLE, FL 33772

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 8461  
SEMINOLE, FL 33775

**New Mailing Address:**

**FEI Number:** 20-4313133

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NIENDORF, LEVI  
10716 - 99TH PLACE  
SEMINOLE, FL 33772 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P,S  
**Name:** NIENDORF, LEVI  
**Address:** 10716 - 99TH PLACE  
**City-St-Zip:** SEMINOLE, FL 33772

**Title:** VP  
**Name:** NIENDORF, KRISTIN  
**Address:** 10716 - 99TH PLACE  
**City-St-Zip:** SEMINOLE, FL 33772

I hereby 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 all other like empowered.

**SIGNATURE:** KRISTIN NIENDORF

VP

04/19/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date