2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 07, 2008
Secretary of State

DOCUMENT# P06000035318

Entity Name: FLORIDA CENTRAL APPRAISAL, INC.

Current Principal Place of Business:

152 BLUE MOON AVE.
LAKE PLACID, FL 33852 US

New Principal Place of Business:

Current Mailing Address:

152 BLUE MOON AVE.
LAKE PLACID, FL 33852 US

New Mailing Address:

FEI Number: 20-4463558 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HYRE, GARY
214 N. MAIN AVE.
LAKE PLACID, FL 33852 US

Name and Address of New Registered Agent:

HYRE, GARY
152 BLUE MOON AVE
LAKE PLACID, FL 33852 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: GARY HYRE 07/07/2008
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: PVST ( ) Delete
Name: HYRE, GARY
Address: 214 N. MAIN AVE.
City-St-Zip: LAKE PLACID, FL 33852 US

Title: D ( ) Delete
Name: HYRE, GARY
Address: 214 N. MAIN AVE.
City-St-Zip: LAKE PLACID, FL 33852 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change ( ) Addition
Name: HYRE, GARY
Address: 152 BLUE MOON AVE
City-St-Zip: LAKE PLACID, FL 33852 US

Title: D (X) Change ( ) Addition
Name: HYRE, GARY
Address: 152 BLUE MOON AVE
City-St-Zip: LAKE PLACID, FL 33852 US

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: GARY HYRE D 07/07/2008
Electronic Signature of Signing Officer or Director Date