2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000081389

1. Entity Name

PRIORITY APPRAISAL & MORTGAGE SERVICES, INC.



FILED Jan 09, 2008 08:00 A Secretary of State

Principal Place of Business

1046 MIDDLESEX DRIVE TRINITY, FL 34655 Mailing Address

1046 MIDDLESEX DRIVE TRINITY, FL 34655



DO NOT WRITE IN THIS SPACE

01042008 No Chg-P CR2E034 (11/05)

4. FEI Number 57-1238217

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PETERMAN, SHARI L 1046 MIDDLESEX DRIVE TRINITY, FL 34655

DO NOT WRITE

	named entity submits this statement for the plicons of registered agent.	urpose of changing its register	red office or reg	istered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title t	applicable (NOTE: Registere	ad Agent signature rec	quired when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.	ncing	\$5.00 May Be Added to Fees	
*10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST PETERMAN, SHARI L 1046 MIDDLESEX DRIVE TRINTIY, FL 34655	CTORS			
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TITLE			Tyddin god		

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment pritty an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

Shini Possman 1/4/0

727-372-5919

Daytime Phone #