## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000115368

City-St-Zip:

CORAL SPRINGS, FL 33065

Entity Name: AVENUE ROAD APPRAISALS P.A

FILED Apr 13, 2009 Secretary of State

y	THE THE REAL PRINCIPLE OF THE PRINCIPLE			
Current P	rincipal Place of Business:	New Principal Place o	New Principal Place of Business:	
SUITE 201	AMPLE ROAD PRINGS, FL 33065			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
6168 MOHAWK TER MARGATE, FL 33063		SUITE 201	9319 W SAMPLE ROAD SUITE 201 CORAL SPRINGS, FL 33065	
FEI Number:	: FEI Number Applied For (X)	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
13302 WIN SUITE A-1	TATES CORPORATION AGENTS, INC. NDING OAKS BLVD 00 L 336123425 US			
	named entity submits this statement for the e of Florida.	e purpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:			
	Electronic Signature of Registered A	gent	Date	
Election Car	npaign Financing Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PRES () Delete ROBERTSON, JASON 9319 W SAMPLE ROAD SUITE 201 CORAL SPRINGS, FL 33065	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	SEC ( ) Delete ROBERTSON, JASON 9319 W SAMPLE ROAD SUITE 201 CORAL SPRINGS, FL 33065	Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name: Address:	DIR () Delete ROBERTSON, JASON 9319 W SAMPLE ROAD SUITE 201	Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: JASON ROBERTSON PRES 04/13/2009