

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000133262

Entity Name: TRUACCESS APPRAISALS, INC

FILED  
Mar 24, 2009  
Secretary of State

## Current Principal Place of Business:

3301 TUSCANY WAY  
BOYNTON BEACH, FL 33435

## New Principal Place of Business:

6242 MADRAS CIRCLE  
BOYNTON BEACH, FL 33437

## Current Mailing Address:

3301 TUSCANY WAY  
BOYNTON BEACH, FL 33435

## New Mailing Address:

6242 MADRAS CIRCLE  
BOYNTON BEACH, FL 33437

FEI Number: 20-5741575

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TRUAX, JOHN B  
3301 TUSCANY WAY  
BOYNTON BEACH, FL 33435 US

## Name and Address of New Registered Agent:

TRUAX, JOHN B  
6242 MADRAS CIRCLE  
BOYNTON BEACH, FL 33437 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:

03/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: TRUAX, JOHN B  
Address: 3301 TUSCANY WAY  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: VP, ( ) Delete  
Name: SPYER, MILAGROS  
Address: 3301 TUSCANY WAY  
City-St-Zip: BOYNTON BEACH, FL 33435

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: TRUAX, JOHN B  
Address: 6242 MADRAS CIRCLE  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: VP, (X) Change ( ) Addition  
Name: SPYER, MILAGROS  
Address: 6242 MADRAS CIRCLE  
City-St-Zip: BOYNTON BEACH, FL 33437

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: JOHN B TRUAX

P

03/24/2009

Electronic Signature of Signing Officer or Director

Date