

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000050756

FILED
Jun 17, 2009
Secretary of State

Entity Name: ANTRIAN APPRAISAL SERVICES INC

Current Principal Place of Business:

31 IROQUOIS TRAIL
ORMOND BEACH, FL 32174 US

New Principal Place of Business:

226 N NOVA RD #120
ORMOND BEACH, FL 32174 US

Current Mailing Address:

31 IROQUOIS TRAIL
ORMOND BEACH, FL 32174 US

New Mailing Address:

226 N NOVA RD #120
ORMOND BEACH, FL 32174 US

FEI Number: 20-8876678

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEAN, ELIZABETH H
31 IROQUOIS TRAIL
ORMOND BEACH, FL 32174 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

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: M () Delete
Name: BEAN, ELIZABETH H
Address: 31 IROQUOIS TRAIL
City-St-Zip: ORMOND BEACH, FL 32174 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: M (X) Change () Addition
Name: BEAN, ELIZABETH H
Address: 226 N NOVA RD #120
City-St-Zip: ORMOND BEACH, FL 32174 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: ELIZABETH BEAN

MS

06/17/2009

Electronic Signature of Signing Officer or Director

Date