## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # P92000002645**

1. Entity Name

REGIONAL APPRAISERS & CONSULTANTS, INC.



Principal Place of Business

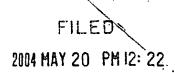
Mailing Address

5179 EL PINE WAY

SIGNATURE:

PALM BEACH GARDENS, FL 33418 US

P.O. BOX 30924 PALM BEACH GARDENS, FL 33420



SECRETARY OF STATE TALLAHASSEE. FLORIDA



65-0371990

4. FEI Number

Not Applicable

\$8.75 Additional

Applied For

5. Certificate of Status Desired

\$6.75 Additions Fee Required

6. Name and Address of Current Registered Agent

GORDON, BRIAN 5179 EL PINE WAY PALM BEACH GARDENS, FL 33418

## DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE					
FILE NOW!!! FEE IS \$550.00  Due by September 8, 2004  9. Election Campaign Finan Trust Fund Contribution.		ng 🗆	\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GORDON, BRIAN 5179 EL'PINE WAY PALM BEACH GARDENS, FL 33418		100036966471		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				os/7	00036966471 20/0401061005 **550.00
NAME STREET ADDRESS CITY-ST-ZIP	1			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN 7	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					100
12. I hereby certify that the information supplies with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 with an address, with all other like empowered.					

O OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR