


2008 FOR PROFIT CORPORATION
ANNUAL REPORT

Mar 1
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DOCUMENT # P93000044418 1. Entity Name BONEY-CARR APPRAISERS, INC.	
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Principal Place of Business 499 N SR 434 STE 2129 ALTAMONTE SPRINGS, FL 32714-170 US	Mailing Address 499 N SR 434 STE 2129 ALTAMONTE SPRINGS, FL 32714-170 US
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03112008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3191310	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

CARR, DERRICK G
499 N SR 434
STE 2129
ALTAMONTE SPRINGS, FL 32714-2170

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CARR, DERRICK G 499 N SR 434, STE 2129 ALTAMONTE SPRINGS, FL 32714
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04/01/08-80046-006 150.00

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12. I hereby certify that the information supplied with this filing 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 with an address, with all other like empowered.

SIGNATURE:  3/12/08 407862-1161
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #