## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P93000058010

Entity Name: LAWSON VALUATION GROUP, INC.

Apr 27, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business	Current Principal Place of Business:	New Principal Place of Business
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8895 N MILITARY TRAIL SUITE 304 E

PALM BEACH GARDENS, FL 33410 US

**New Mailing Address: Current Mailing Address:** 

8895 N MILITARY TRAIL SUITE 304 E

PALM BEACH GARDENS, FL 33410 US

FEI Number: 65-0434041 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LAWSON, DOUGLAS B 8895 N. MILITARY TRAI., STE 304E PALM BEACH GARDENS, FL 33410 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:

Electronic Signature of Registered Agent Date

Title:

Title:

Name:

Address:

City-St-Zip:

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PALM BEACH GARDENS, FL 33418

(X) Change ( ) Addition

(X) Change ( ) Addition

Title: PDST ( ) Delete LAWSON, DOUGLAS B Name: 4106 BEECH AVENUE Address:

City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VΡ () Delete LAWSON, DEBRA Name:

4106 BEECH AVENUE Address:

PALM BEACH GARDENS, FL 33410 City-St-Zip:

Name: LAWSON, DEBRA

PDST

VΡ

10226 HUNT CLUB LANE Address:

PALM BEACH GARDENS, FL 33418 City-St-Zip:

LAWSON, DOUGLAS B

10226 HUNT CLUB LANE

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DOUGLAS B. LAWSON **PDST** 04/27/2004