

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90726 017 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P93000078131

1. Entity Name
**APPRAISAL ASSOCIATES OF CENTRAL FLORIDA,
INC.**



Principal Place of Business
1906 HILLCREST ST
ORLANDO, FL 32803 US

Mailing Address
1906 HILLCREST ST
ORLANDO, FL 32803 US

2. Principal Place of Business
2201 HOWARD DR

3. Mailing Address
2201 HOWARD DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State
WINTER PARK, FL

City & State
WINTER PARK, FL

4. FEI Number
59-3211003

Applied For
☐ Not Applicable

Zip
32789

Country
US

Zip
32789

Country
US

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RILEY, DAWNA G
1906 HILLCREST ST
ORLANDO, FL 32803**

Name
RILEY, DAWNA G

Street Address (P.O. Box Number is Not Acceptable)

2201 HOWARD DR

City
WINTER PARK

FL

Zip Code
32789

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.

4/8/03

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating.)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
PTS ☐ Delete
NAME
RILEY, DAWNA G
STREET ADDRESS
1906 HILLCREST STREET
CITY-ST-ZIP
ORLANDO, FL 32803

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
PTS ☒ Change ☐ Addition
NAME
RILEY, DAWNA G
STREET ADDRESS
2201 HOWARD DR
CITY-ST-ZIP
WINTER PARK, FL 32789

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
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TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied 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 authority to be empowered.

SIGNATURE:

PRESIDENT

4/8/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)