2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2006
Secretary of State

DOCUMENT# P94000038442

Entity Name: AAA APPRAISAL ASSOCIATES, INC.

Current Principal Place of Business:

4801 S UNIVERSITY DR
SUITE 209
DAVIE, FL 33328

New Principal Place of Business:

Current Mailing Address:

4801 S UNIVERSITY DR
SUITE 209
DAVIE, FL 33328

New Mailing Address:

FEI Number: 59-3248803 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

STIOGE, SHARON
4801 S UNIVERSITY DR
SUITE 209
DAVIE, FL 33328 US

Name and Address of New Registered Agent:

STAGE, SHARON
4801 S UNIVERSITY DR
SUITE 209
DAVIE, FL 33328 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: SHARON STAGE 03/10/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: STAGE, SHARON
Address: 4801 S UNIVERSITY DR SUITE 209
City-St-Zip: DAVIE, FL 33328

Title: VST ( ) Delete
Name: STAGE, SHARON
Address: 4801 S UNIVERSITY DR SUITE 209
City-St-Zip: DAVIE, FL 33328

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VST (X) Change ( ) Addition
Name: WILSON, CAROLYN F
Address: 4801 S UNIVERSITY DR SUITE 209
City-St-Zip: DAVIE, FL 33328

I hereby certify that the information supplied with this filing does not qualify for the 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: SHARON STAGE P 03/10/2006
Electronic Signature of Signing Officer or Director Date