


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jun 05, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P95000001355</b> 1. Entity Name ZYLSTRA & REYNOLDS APPRAISAL SERVICES, P.A.	
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Principal Place of Business 1971 12TH AVE. NAPLES, FL 34120 US	Mailing Address 1971 12TH AVE. NAPLES, FL 34120 US
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05242007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>65-0549438</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

6. Name and Address of Current Registered Agent  WILLIS, JAMES E ESQ. 1100 5TH AVENUE SOUTH SUITE 409 NAPLES, FL 34102
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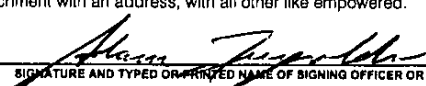
<b>DO NOT WRITE IN THIS SPACE</b>
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>
DATE _____

<b>FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P REYNOLDS, ADAM J 130 1ST STREET NORTHWEST NAPLES, FL 34120
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC ZYLSTRA, SUEANN 1971 12TH AVE NE. NAPLES, FL 34120
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<p>U00000785878 06/05/07-80001-013 558.75</p> <p><b>DO NOT WRITE IN THIS SPACE</b></p>
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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: 	Date 5-24-07	Daytime Phone # 239-269-2979