

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000024820

FILED
Mar 31, 2006
Secretary of State

Entity Name: STATE WIDE APPRAISAL SERVICES, INC.

Current Principal Place of Business:

7122 SEMINOLE BLVD.
SEMINOLE, FL 33772 US

New Principal Place of Business:

Current Mailing Address:

7122 SEMINOLE BLVD.
SEMINOLE, FL 33772 US

New Mailing Address:

FEI Number: 59-3307290 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDWARDS, JASON M SR
7122 SEMINOLE BLVD
SEMINOLE, FL 33772 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: EDWARDS, JASON M SR
Address: 13701 MONTEGO DRIVE
City-St-Zip: SEMINOLE, FL 33776

Title: VP () Delete
Name: GERMAN, SHEILA
Address: 2067 ISLAND CIR.
City-St-Zip: WESTON, FL 33326

Title: T () Delete
Name: EDWARDS, MONICA L
Address: 13701 MONTEGO DRIVE
City-St-Zip: SEMINOLE, FL 33776

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: O (X) Change () Addition
Name: GERMAN, SHEILA
Address: 2067 ISLAND CIR.
City-St-Zip: WESTON, FL 33326

Title: VP (X) Change () Addition
Name: EDWARDS, MONICA L
Address: 13701 MONTEGO DRIVE
City-St-Zip: SEMINOLE, FL 33776

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: JASON M EDWARDS

P

03/31/2006

Electronic Signature of Signing Officer or Director

_____ Date