

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P95000024820

FILED
Jul 17, 2008
Secretary of State**Entity Name:** STATE WIDE APPRAISAL SERVICES, INC.**Current Principal Place of Business:**13799 PARK BLVD
SUITE 306
SEMINOLE, FL 33776 US**New Principal Place of Business:****Current Mailing Address:**13799 PARK BLVD
SUITE 306
SEMINOLE, FL 33776 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
13701 MONTEGO DRIVE
SEMINOLE, FL 33776 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**OFFICERS AND DIRECTORS:**

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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 SR

P

07/17/2008

Electronic Signature of Signing Officer or Director_____
Date