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May 13 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000016084 (1)

1. Corporation Name
CHEVALIER APPRAISAL SVC. INC.

Principal Place of Business	Mailing Address
1101 MARILYN ST FRUITLAND PARK FL 34731	1101 MARILYN ST FRUITLAND PARK FL 34731-3822

3. Date Incorporated or Qualified: 02/19/1996
3a. Date of Last Report: NEW N/A

2. Principal Place of Business	2a. Mailing Address
21 304 W. Orange St. #21	26 304 W. Orange ST
Suite, Apt. #, etc. 22 # 21	Suite, Apt. #, etc. 27 # 21
City & State 23 LEESBURG FL	City & State 28 LEESBURG FL
Zip / Country 24 34748 / 25 USA	Zip / Country 29 34748 / 30 USA

4. FEI Number: 59-358 6442 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No LOCAL

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CHEVALIER, KERRY L 1101 MARILYN ST FRUITLAND PARK FL 34731	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	President	☐ DELETE	1.1 TITLE	V. President/Secretary/Treasurer	☐ Change ☒ Addition
NAME	Kerry L Chevalier		1.2 NAME	Roxanne M. Annagnostou	
STREET ADDRESS	304 W. Orange St. #21		1.3 STREET ADDRESS	2687 Winchester Cir	
CITY-ST-ZIP	Leesburg Fla 34748		1.4 CITY-ST-ZIP	Eustis, Fla 32726	
TITLE	V. President	☒ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	Miriam R. Chevalier		2.2 NAME		
STREET ADDRESS	1101 Marilyn St		2.3 STREET ADDRESS		
CITY-ST-ZIP	Fruitland Pk, FL 34731		2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (9/96)

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Kerry L. Chevalier 352