2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2005
Secretary of State

DOCUMENT# P98000018343

Entity Name: CEC APPRAISAL SERVICES, INC.

Current Principal Place of Business:

3106 SOUTH HORSESHOE DRIVE
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

3106 SOUTH HORSESHOE DRIVE
NAPLES, FL 34104

New Mailing Address:

FEI Number: 59-3502581 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BROWN, DENNIS C ESQ.
BOND, SCHOENECK & KING, P.A.
4001 TAMIAMI TRAIL NORTH, SUITE 250
NAPLES, FL 34103 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:	VSD	( ) Delete
Name:	STEPHEN, MICHAEL F	
Address:	3106 SOUTH HORSESHOE DRIVE	
City-St-Zip:	NAPLES, FL 34104	
Title:	VTD	( ) Delete
Name:	WESTON, DAVID E	
Address:	3106 SOUTH HORSESHOE DRIVE	
City-St-Zip:	NAPLES, FL 34104	
Title:	P	( ) Delete
Name:	REEVE, WILLIAM H III	
Address:	3106 S. HORSESHOE DR.	
City-St-Zip:	NAPLES, FL 34104	
Title:	D	( ) Delete
Name:	PILGES, BRUCE R	
Address:	4370 S. TAMIAMI TRAIL, STE. 310	
City-St-Zip:	SARASOTA, FL 34231	
Title:	D	( ) Delete
Name:	EWING, RICHARD J	
Address:	3106 S. HORSESHOE DRIVE	
City-St-Zip:	NAPLES, FL 34104	
Title:	D	( ) Delete
Name:	POFF, MICHAEL T	
Address:	3106 S. HORSESHOE DRIVE	
City-St-Zip:	NAPLES, FL 34104	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	P	(X) Change ( ) Addition
Name:	REEVE, WILLIAM H III	
Address:	3106 S. HORSESHOE DRIVE	
City-St-Zip:	NAPLES, FL 34104	
Title:	D	(X) Change ( ) Addition
Name:	WORLEY, DANA L	
Address:	3106 S. HORSESHOE DRIVE	
City-St-Zip:	NAPLES, FL 34104	
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 for the exemption stated in Section 119.07(3)(i), 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: MICHAEL F STEPHEN VSD 04/22/2005

Electronic Signature of Signing Officer or Director — Date