2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000092497

Entity Name: RMS APPRAISAL SERVICES, INC.

FILED Apr 06, 2011 Secretary of State

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|---|---------------------------------|-------------------------------------|---|--|
| Current Principal Place of Business: | | New Principal Place of | Business: | |
| 25 FLORIDA PARK DR. SUITE #F PALM COAST, FL 32137 | | | | |
| Current Mailing Address: | | New Mailing Address: | | |
| 25 FLORIDA PARK DR. SUITE #F PALM COAST, FL 32137 | | | | |
| FEI Number: 59-3541148 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | Name and Address of I | Name and Address of New Registered Agent: | |
| O'BRIEN, JAMES M ESQ. 1686 WEST HIBISCUS BL MELBOURNE, FL 32901 | VD. US | | | |
| The above named entity su in the State of Florida. | bmits this statement for the pu | rpose of changing its registered of | office or registered agent, or both, | |
| SIGNATURE: | | | | |
| Electronic | Signature of Registered Ager | nt | Date | |
| | | | | |
| OFFICERS AND DIRECT | ORS: | | | |

Title:

Name: CHAPPUIS, SCOTT C
Address: 133 UNIVERSITY CIRCLE
City-St-Zip: ORMOND BEACH, FL 32176

I hereby 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 all other like empowered.

SIGNATURE: SCOTT C. CHAPPUIS OWNE 04/06/2011