


Jan 2
Se

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P99000084060		
1. Entity Name HARTMAN APPRAISAL SERVICE, INC.		
Principal Place of Business 12055 NW 29TH STREET CORAL SPRINGS, FL 33065	Mailing Address 12055 NW 29TH STREET CORAL SPRINGS, FL 33065	

U00000732748
01/24/08-80021-008 150.00



01202008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0947963	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**HARTMAN, RICHARD
12055 NW 29TH STREET
CORAL SPRINGS, FL 33065**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	HARTMAN, RICHARD
STREET ADDRESS	12055 NW 29TH STREET
CITY-ST-ZIP	CORAL SPRINGS, FL 33065
TITLE	D
NAME	HARTMAN, HELENE
STREET ADDRESS	12055 NW 29TH STREET
CITY-ST-ZIP	CORAL SPRINGS, FL 33065
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Helene B Hartman Helene B Hartman 1/20/08 954-755-2733
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #