

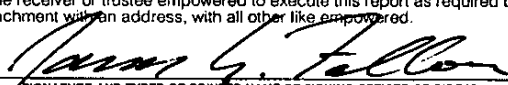


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 8:00 am
Secretary of State

01-23-2006 90048 021 ***150.00

DOCUMENT # V26654 1. Entity Name FLORIDA APPRAISERS & CONSULTANTS, INC.					
Principal Place of Business 724 BUNKER RD. W PALM BCH., FL 33405				Mailing Address 724 BUNKER RD. W PALM BCH., FL 33405	
2. Principal Place of Business 784 U.S. Hwy 1		3. Mailing Address 784 U.S. Hwy 1		 01172006 Chg-P CR2E034 (11/05)	
Suite, Apt. #, etc. Suite 18		Suite, Apt. #, etc. Suite 18			
City & State North Palm Beach, FL		City & State North Palm Beach, FL			
Zip 33408		Zip 33408			
Country USA		Country USA		4. FEI Number 65-0331131	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent HARRIS, J. RICHARD 4400 PGA BLVD 8TH FLOOR PALM BEACH GARDENS, FL 33410				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP FALLON, CAROLINE L. 711 HUMMINGBIRD WAY #102 NORTH PALM BEACH, FL 33408	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVST FALLON, JAMES L. 711 HUMMINGBIRD WAY #102 NORTH PALM BEACH, FL 33408	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVST FALLON, JAMES L. 711 HUMMINGBIRD WAY #102 NORTH PALM BEACH, FL 33408	<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVST FALLON, JAMES L. 711 HUMMINGBIRD WAY #102 NORTH PALM BEACH, FL 33408	<input type="checkbox"/> Delete			
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: 		1/17/2006		561-582-8923	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR James L. Fallon, Pres.		Date		Daytime Phone #	