

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V26654

**FILED**  
**Jan 30, 2011**  
**Secretary of State**

**Entity Name:** FLORIDA APPRAISERS & CONSULTANTS, INC.

**Current Principal Place of Business:**

1339 S KILLIAN DR  
SUITE 6  
LAKE PARK, FL 33403

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 530398  
LAKE PARK, FL 33403

**New Mailing Address:**

**FEI Number:** 65-0331131

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HARRIS, J. RICHARD  
4400 PGA BLVD  
8TH FLOOR  
PALM BEACH GARDENS, FL 33410 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

**OFFICERS AND DIRECTORS:**

**Title:** DV  
**Name:** FALLON, CAROLINE L.  
**Address:** 711 HUMMINGBIRD WAY #102  
**City-St-Zip:** NORTH PALM BEACH, FL 33408

**Title:** DPST  
**Name:** FALLON, JAMES L.  
**Address:** 711 HUMMINGBIRD WAY #102  
**City-St-Zip:** NORTH PALM BEACH, FL 33408

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:** JAMES L FALLON

PRES

01/30/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date