

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V35248 (6)

1. Corporation Name

ATLANTIC APPRAISAL CORPORATION

Principal Place of Business

Mailing Address

374 S. ATLANTIC AVENUE
ORMOND BEACH FL 32176

444 SEABREEZE BLVD
SUITE 800
DAYTONA BEACH FL 32118
US



2. Principal Place of Business

2a. Mailing Address

21 555 W. GRANADA BLVD 26 P.O. BOX 1231

22 Suite, Apt. #, etc. Suite E-6

27 Suite, Apt. #, etc.

23 City & State ORMOND BCH, FL

28 City & State DAYTONA BCH, FL

24 Zip 32174 25 Country USA

29 Zip 32115 30 Country USA

3. Date Incorporated or Qualified

05/06/1992

3a. Date of Last Report

03/27/1995

4. FEI Number

59-3124391

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROST, SCOTT R
444 SEABREEZE BLVD
SUITE 800
DAYTONA BEACH FL 32118

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent (do not sign if not applicable)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE D
NAME GOODRICH, JOHN
STREET ADDRESS 374 S. ATLANTIC AVE
CITY - ST - ZIP ORMOND BEACH FL

☐ DELETE

TITLE VPST
NAME WHALEN, ANN M
STREET ADDRESS 374 S. ATLANTIC AVE
CITY - ST - ZIP ORMOND BEACH FL

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TITLE
NAME
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CITY - ST - ZIP

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CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☒ Change ☒ Addition

P
555 W. GRANADA BLVD, Suite E-6
ORMOND BCH, FL 32174

☒ Change ☒ Addition

D
555 W. GRANADA BLVD, Suite E-6
ORMOND BCH, FL 32174

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John L. Goodrich, President

4/9/96

804 677-8925

Daytime Phone #

CR2E034 (12/95)