

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000067622

**FILED**  
**Jan 09, 2011**  
**Secretary of State**

**Entity Name:** OAKES APPRAISAL SERVICES, INC.

**Current Principal Place of Business:**

645 COPPERHEAD CIR.  
ST. AUGUSTINE, FL 32092

**New Principal Place of Business:**

**Current Mailing Address:**

645 COPPERHEAD CIR.  
ST. AUGUSTINE, FL 32092

**New Mailing Address:**

FEI Number: 20-2911239

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

OAKES, TODD L  
645 COPPERHEAD CIR.  
ST. AUGUSTINE, FL 32092 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: PRES  
Name: OAKES, TODD L  
Address: 645 COPPERHEAD CIR.  
City-St-Zip: ST. AUGUSTINE, FL 32092

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: TODD L OAKES

PRES

01/09/2011

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

\_\_\_\_\_ Date