

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000053733

**Entity Name:** 1ST RESPONSE ADJUSTERS, P.A.

**Current Principal Place of Business:**

6000 PENNINSULAR AVE  
WO-49A  
KEY WEST, FL 33040

**Current Mailing Address:**

PO BOX 2376  
KEY WEST, FL 33045 US

**FEI Number:** 26-0381137

**Certificate of Status Desired:** No

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

THOR, CINDY LOU  
6000 PENNINSULAR AVE  
WO-49A  
KEY WEST, FL 33040 US

*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

**Officer/Director Detail :**

Title PST  
Name THOR, CINDY LOU  
Address PO BOX 2376  
City-State-Zip: KEY WEST FL 33045

Title D  
Name THOR, CINDY LOU  
Address PO BOX 2376  
City-State-Zip: KEY WEST FL 33045

Title VP  
Name THOR, CINDY LOU  
Address PO BOX 2376  
City-State-Zip: KEY WEST FL 33045

*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:** CINDY LOU THOR

**PRES**

**03/25/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date