

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000097069

**Entity Name:** ORFITELLI CLAIMS ADJUSTING, INC

**Current Principal Place of Business:**

16540 POINTE VILLAGE DR  
201  
LUTZ, FL 33558

**Current Mailing Address:**

635 6TH AVE N  
SAINT PETERSBURG, FL 33701

**FEI Number:** 27-4048734

**Certificate of Status Desired:** No

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

ORFITELLI, ANDREW  
635 6TH AVE N  
SAINT PETERSBURG, FL 33701 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 P  
Name ORFITELLI, ANDREW  
Address 635 6TH AVE N  
City-State-Zip: SAINT PETERSBURG FL 33701

*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:** ANDREW ORFITELLI

**OWNER**

**02/04/2014**

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

\_\_\_\_\_  
Date