

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000109286

**Entity Name:** JUSTICE CLAIM SERVICES, INC.

**Current Principal Place of Business:**

103 11TH AVE  
INDIALANTIC, FL 32903

**Current Mailing Address:**

PO BOX 33452  
INDIALANTIC, FL 32903

**FEI Number: 45-4134325**

**Certificate of Status Desired: No**

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

JUSTICE, DAVID A  
140 9TH AVE  
INDIALANTIC, FL 32903 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            D  
Name            JUSTICE, DAVID A  
Address        140 9TH AVE  
City-State-Zip: INDIALANTIC FL 32903

*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: DAVID A JUSTICE**

**PRESIDENT**

**03/31/2015**

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

\_\_\_\_\_  
Date