

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000094933

Entity Name: WORKCOMP SOLUTIONS, INC.

Current Principal Place of Business:

5143 SOUTH LAKE LAND DRIVE
SUITE 1
LAKE LAND, FL 33813

Current Mailing Address:

P.O. BOX 24987
LAKE LAND, FL 33802

FEI Number: 59-3618843

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MILLS, DARRELL J
5143 SOUTH LAKE LAND DRIVE
SUITE 1
LAKE LAND, FL 33813 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 MILLS, DARRELL J
Address P.O. BOX 24987
City-State-Zip: LAKE LAND FL 33802

Title VP
Name MILLS, LORRI
Address P.O. BOX 24987
City-State-Zip: LAKE LAND FL 33802

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: LORRI MILLS

VICE PRESIDENT

03/01/2016

Electronic Signature of Signing Officer/Director Detail

Date