

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000126457

**Entity Name:** WOOD STREET CLAIMS ADJUSTERS, LLC

**Current Principal Place of Business:**

489 WOOD ST  
DUNEDIN, FL 34698

**Current Mailing Address:**

489 WOOD ST  
DUNEDIN, FL 34698

**FEI Number:** 45-2390908

**Certificate of Status Desired:** No

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

CUTLER, BERTRAM  
489 WOOD ST  
DUNEDIN, FL 34698 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

**Authorized Person(s) Detail :**

Title MGRM  
Name CUTLER, BERTRAM  
Address 489 WOOD ST  
City-State-Zip: DUNEDIN FL 34698

Title MGRM  
Name CUTLER, SHANA  
Address 489 WOOD ST  
City-State-Zip: DUNEDIN FL 34698

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SHANA CUTLER

**MGRM**

**04/15/2013**

Electronic Signature of Signing Authorized Person(s) Detail

Date