

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000001461

Entity Name: NATIONAL CONNECTFORCE CLAIMS, INC.**Current Principal Place of Business:**701 B STREET, SUITE 2100
SAN DIEGO, CA 92101**Current Mailing Address:**701 B STREET, SUITE 2100
SAN DIEGO, CA 92101 US**FEI Number:** 45-4373596**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 VP, TREASURER
Name FREEBOURN, RICHARD A.
Address 220 S. RIDGEWOOD AVENUE
City-State-Zip: DAYTONA BEACH FL 32114

Title VP, SECRETARY
Name LLOYD, ROBERT W.
Address 220 S. RIDGEWOOD AVENUE
City-State-Zip: DAYTONA BEACH FL 32114

Title VP, ASSISTANT SECRETARY
Name ROBINSON, ANTHONY
Address 220 S. RIDGEWOOD AVE.
City-State-Zip: DAYTONA BEACH FL 32114

Title VP
Name WATTS, ANDY
Address 220 S. RIDGEWOOD AVE.
City-State-Zip: DAYTONA BEACH FL 32114

Title VP
Name LANNI, JAMES
Address 220 S. RIDGEWOOD AVENUE
City-State-Zip: DAYTONA BEACH FL 32114

Title PRESIDENT
Name MARSHALL, SCOTT
Address 2548 CAMPBELL PLACE
City-State-Zip: CARLSBAD CA 92009

Title CHAIRMAN OF THE BOARD,
DIRECTOR
Name WALKER, CHRIS L.
Address 701 B STREET
SUITE 2100
City-State-Zip: SAN DIEGO CA 92101

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: ANTHONY ROBINSONVICE PRESIDENT,
ASSISTANT SECRETARY

04/09/2016

Electronic Signature of Signing Officer/Director Detail_____
Date