

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000004919

Entity Name: EAUTOCLAIMS.COM, INC.

FILED
Apr 25, 2005
Secretary of State

Current Principal Place of Business:

110 EAST DOUGLAS RD.
OLDSMAR, FL 34677

New Principal Place of Business:

Current Mailing Address:

110 EAST DOUGLAS RD.
OLDSMAR, FL 34677

New Mailing Address:

FEI Number: 95-4583945

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEIDEL, ERIC
110 EAST DOUGLAS RD.
OLDSMAR, FL 34677 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SEIDEL, ERIC
Address: 110 EAST DOUGLAS RD.
City-St-Zip: OLDSMAR, FL 34677

Title: C () Delete
Name: DICKSON, JEFF
Address: 110 EAST DOUGLAS RD.
City-St-Zip: OLDSMAR, FL 34677

Title: D () Delete
Name: TRBOVICH, NICHOLAS JR
Address: 1110 MAPLE STREET
City-St-Zip: ELMA, NY 14059

Title: D () Delete
Name: KORGE, CHRISTOPHER
Address: 230 PALERMO AVENUE
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LARRY C. COLTON

CFO

04/25/2005

Electronic Signature of Signing Officer or Director

_____ Date