

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000002394

Entity Name: EQUITY CLAIMS, INC.

**FILED**  
**Apr 25, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4513 MISTY COURT  
WILLIAMSBURG, VA 23185

**New Principal Place of Business:**

**Current Mailing Address:**

5824 BEE RIDGE RD #328  
SARASOTA, FL 34233

**New Mailing Address:**

FEI Number: 04-3701134

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

IERULLI, NICHOLAS  
4480 SATINLEAF LANE  
SARASOTA, FL 34241 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: IERULLI, NICHOLAS  
Address: 4513 MISTY COURT  
City-St-Zip: WILLIAMSBURG, VA 23185

Title: VP  
Name: IERULLI, PAM  
Address: 4513 MISTY COURT  
City-St-Zip: WILLIAMSBURG, VA 23185

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: PAM IERULLI

VP

04/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date