2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000002505

Entity Name: BRIGHTCLAIM, INC.

FILED Jan 11, 2007 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

3295 RIVER EXCHANGE DR SUITE 370 3850 HOLCOMB BRIDGE ROAD

SUITE 410 NORCROSS, GA 30092

NORCROSS, GA 30092

Current Mailing Address: New Mailing Address:

3295 RIVER EXCHANGE DR SUITE 370 3850 HOLCOMB BRIDGE ROAD NORCROSS, GA 30092

SUITE 410

NORCROSS, GA 30092

FEI Number: 20-1702730 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NRAI SERVICES INC 2731 EXECUTIVE PARK DR SUITE 4 WESTON, FL 33331

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

ROGERS, HOWARD L JR ROGERS, HOWARD L JR Name: Name:

3295 RIVER EXCHANGE DR SUITE 370 3850 HOLCOMB BRIDGE ROAD, SUITE 410 Address: Address:

NORCROSS, GA 30092 City-St-Zip: NORCROSS, GA 30092 City-St-Zip:

Title: DS () Delete Title: DS (X) Change () Addition SUGG, STEVEN Name: Name: SUGG, STEVEN

3295 RIVER EXCHANGE DR SUITE 370 3850 HOLCOMB BRIDGE ROAD, SUITE 410 Address: Address:

NORCROSS, GA 30092 NORCROSS, GA 30092 City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition DT

MCLAUGHLIN, JOHN MCLAUGHLIN, JOHN Name: Name:

3295 RIVER EXCHANGE DR SUITE 370 3850 HOLCOMB BRIDGE ROAD, SUITE 410 Address: Address:

City-St-Zip: NORCROSS, GA 30092 City-St-Zip: NORCROSS, GA 30092

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: HOWARD L. ROGERS, JR. CP 01/11/2007