## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F07000005043

Title:

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CFOD

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RICHARDS, THOMAS N

**EDMOND, OK 73003** 

5812 COUNTRY CLUB DRIVE

FILED Jan 05, 2009 Secretary of State

Entity Name: CLAIMETRICS SERVICES, INC. **Current Principal Place of Business: New Principal Place of Business:** 7250 NW EXPRESSWAY 9701 N. BOARDWALK BLVD STE 100 OKLAHOMA CITY, OK 73162 OKLAHOMA CITY, OK 73132 **New Mailing Address: Current Mailing Address:** P.O. BOX 22475 OKLAHOMA CITY, OK 73123 FEI Number: 26-0448877 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: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 SELF, DEBBIE TOPPINS, LAUREN A Name: Name: 7250 NW EXPRESSWAY 704 NW 194TH TERRACE Address: Address: City-St-Zip: OKLAHOMA CITY, OK 73132 City-St-Zip: EDMOND, OK 73012 Title: Title: () Delete () Change () Addition SNIPES, A. MARSHALL Name: Name: 3417 PARTRIDGE ROAD Address: Address: OKLAHOMA CITY, OK 73120 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: LAUREN A. TOPPINS SEC 01/05/2009

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