FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

F93000005612 (7)

CLAIMS ADJUSTING AND PROCESSING SERVICE COMPANY

Principal Place of Business PENNINGTON-ROCK HILL RD. PENNINGTON NJ 08534

Mailing Address

P.O. BOX 900, TAX ADMIN. 1201 ELM STREET DALLAS TX 75270-2014



3. Date Incorporated or Qualified 3a. Date of Last Report

2. Principal Place of Purinces						12/10/1993	05	<u> 05/01/1995</u>		
z, Principal Pi	Principal Place of Business 2a. Mailing Address			0.		4. FEI Number			Applied For	
Suite, Apt.	+ ato	26 3225 GAI	TOWNS CHILD			75-2510440			Not Applicable	
22 Suite, Apr.	#, etc.	_	Suite, Apt. #, etc. 27 STATE TAX DEPT			5. Certificate of Status Desired	П		5 Additional	
City & State	9	27 STATE 7/ City & State	YX U	671					Required	
23		28 FAIRFAY	V/	Q		6. Election Campaign Financing Trust Fund Contribution	9 🗀		May Be	
Ζιρ	Country	Zip		untry	··	8. This corporation has liability			d to Fees	
24	25	29 22037	<u> </u>	USA			Yes 🔀 No	: under s	199.032,	
	9. Name and Address of Curre	nt Registered Agent		.,,		10. Name and Address of Ne		gent		
			<u> </u>	81 1	Name			3		
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 110 NORTH MAGNOLIA STREET				82 5	2 Street Address (P.O. Box Number is Not Acceptable)					
				02 3	Sueet Adores	or vices to the manipulation in the vice by				
TALLAHASSEE FL 32301				83						
				04	Na .					
				1	City		FL	1 1 '	p Code	
11. Pursuant t	to the provisions of Sections 607.050;	and 607.1508, Florida Statut	es, the abo	ove-nan	ned corporat	tion submits this statement for the		uino its r	registered office	
o. rogicio.	ed agent, or both, in the State of Flori th, and accept the obligations of, Sec	ua. Such Change was authoriz	ed by me i	corpora	tion's board	of directors. I hereby accept the a	ippointment as r	egistered	l agent. I am	
SIGNATURE	. 5									
	Signature, typed or printed name of registered agen		OTE Registered	1 Agent sig	nature required v	when reinstating)	DATE			
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO C	FFICERS AND (DIRECTO	RS IN 12	
TIFLE	PD	☐ DELETE	1.11	ITLE				Change	☐ Additron	
NAME	MOLLOY, M K		1.2 N	AME						
STREFT ADDRESS	3225 GALLOWS RD.		1.3 \$	TREET ADE	PRESS					
CHY-ST-ZIP	FAIRFAX VA 22037			TY-ST-2	Р					
THLE	VD	☐ DELETE	2. 1 T	ITLE				Change	■ Addition	
NAME	JIACONIA, R D		2.2 N	AME						
STREET ADDRESS	3225 GALLOWS RD.		2351	TREET ADD	RESS					
CITY - ST - ZIP TITLE	FAIRFAX VA 22037	בם מנונים		ITY-ST-Z	P	w.,				
NAME :	S STEMENOON DA	☐ DELETE		N.A.	İ			Change	Addition	
ĺ	STEVENSON, P A		الأحاق							
STHEET ADDRESS	3225 GALLOWS RD.			TREET ADO	i					
DITY-ST-ZIP TITLE	FAIRFAX VA 22037	☐ DELETE		TY - \$T - ZI						
NAME	I DIDLEY 71/		4.17		T	DLEY, Z.V.	8	Change	Addition	
STREET ADDRESS	DUDLEY, Z.V. 3225 Gallows Rd.		4.2 N/			25 GAILOWS ROAD				
CITY-ST-ZIP	FAIRFAX VA		1	REET ADD		•				
TITLE	AS	∑ DELETE	4.4 Cr 5. 1 Ti	TY-ST-ZI		IRFAX VA 22087		Charte	NOT A serve.	
NAME	OLSON, C T	M OFFER	5. 1 // 5.2 NA		1 7.1	•	_	Change	🔀 Addition	
STREET ADDRESS	1201 ELM ST.			REET ADD	ف7م وقع ا	WEN, F.A. 25 GAILOWS Road				
DITY-ST-ZIP	DALLAS TX 75270			TY-ST-ZI	1	irfax va arobi	,			
IIILE	AS	₩ DELETE	5.4 UI		AS			Change	Addition	
NAME	BOOK, R L	F.3 16	6.2 NA			RNEY, G.G.	L.	онанув	Moneon	
STREET ADORESS	1201 ELM STREET			nme Reet addi	220	25 GAILOWS Road				
DITY - ST - ZIP	DALLAS TX 75270		6400	TV CT 210	· Fa	10EAU 1/4 11687				
4. I do hereby	certify that the information supplied v	vith this filing is voluntarily furni	ished and r	does no	t qualify for t	the exemption stated in Section 1	I O OZIGIJEL ELOCIO	la Statute	ao I furthar	
certify that appears in	certify that the information supplied the information indicated on the and am an officer or director of the corporation to the corporation of the	viun this tiling is voluntarily furn al report or supplemental annu ration or the receiver or trustee in an attachment with an addri	ished and o ual report is e empower ess.	does no s true ar ed to ex	of qualify for the decorate of the course the course this re-	the exemption stated in Section 11 and that my signature shall have the eport as required by Chapter 607,	19.07(3)(k), Florid ne same legal eff Florida Statutes:	a Statute lect as if ; and that	s. I further made under t my name	

SIGNATURE:

ME OF SIGNING OFFICER OF DIRECTOR

ASSISTANT SECRETARY 4/17/96 (703) 846-. 3900