

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000021

FILED  
Jan 04, 2010  
Secretary of State

**Entity Name:** MICHIGAN CLAIM SERVICE, INC.

**Current Principal Place of Business:**

2120 UNIVERSITY PARK DR.  
OKEMOS, MI 48864

**New Principal Place of Business:**

**Current Mailing Address:**

2120 UNIVERSITY PARK DR.  
OKEMOS, MI 48864

**New Mailing Address:**

**FEI Number:** 38-1400206

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DR., STE. 4  
WESTON, FL 33331 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:** T  
**Name:** HARTMAN, SARAH  
**Address:** 2120 UNIVERSITY PARK DR  
**City-St-Zip:** OKEMOS, MI 48864

**Title:** D  
**Name:** MATTHEWS, JAMES R  
**Address:** 27 AVIEMORE DRIVE  
**City-St-Zip:** MASON, MI 48854

**Title:** S  
**Name:** CLAEYS, DEBRA  
**Address:** 2120 UNIVERSITY PARK DR  
**City-St-Zip:** OKEMOS, MI 48864

**Title:** PD  
**Name:** LAROSE, TARA  
**Address:** 2120 UNIVERSITY PARK DR  
**City-St-Zip:** OKEMOS, MI 48864

**Title:** D  
**Name:** PAVLIK, KIM  
**Address:** 12645 WILKINSON ROAD  
**City-St-Zip:** FREELAND, MI 48623

**Title:** D  
**Name:** HAASE, LUKE  
**Address:** 927 WEBSTER  
**City-St-Zip:** TRAVERSE CITY, MI 49686

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:** SARAH HARTMAN

T

01/04/2010

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

\_\_\_\_\_  
Date