

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000021

FILED
Jan 03, 2012
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.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: T,S
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: PD
Name: CLAEYS, DEBRA
Address: 2120 UNIVERSITY PARK DR
City-St-Zip: OKEMOS, MI 48864

Title: D
Name: LAROSE, TARA
Address: 344 HIGHLAND COURT
City-St-Zip: PLAINWELL, MI 49080

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

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

01/03/2012

Electronic Signature of Signing Officer or Director

Date