

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000029122

FILED
Jan 03, 2007
Secretary of State

Entity Name: FLORIDA PROPERTY CLAIMS, LIMITED LIABILITY COMPANY

Current Principal Place of Business:

1335 SAXONY CIRCLE UNIT 313
PUNTA GORDA, FL 33983 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 494349
PORT CHARLOTTE, FL 33949

New Mailing Address:

FEI Number: 16-1638845

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAWSON, ROBERT A
1335 SAXONY CIRCLE UNIT 313
PUNTA GORDA, FL 33983 US

Name and Address of New Registered Agent:

DAWSON, ROBERT A
1443 SEA FAN DRIVE
PUNTA GORDA, FL 33950 US

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:

01/03/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: DAWSON, ROBERT A
Address: 1335 SAXONY CIRCLE UNIT 313
City-St-Zip: PUNTA GORDA, FL 33983

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: DAWSON, ROBERT A
Address: 1443 SEA FAN DRIVE
City-St-Zip: PUNTA GORDA, FL 33950

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ROBERT DAWSON

PRES

01/03/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date