2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# L05000041380

Entity Name: HOMEOWNER CLAIMS PUBLIC ADJUSTERS, LLC

Current Principal Place of Business:

13831 SW 59 STREET
201
MIAMI, FL 33183

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 651280
MIAMI, FL 33265

New Mailing Address:

FEI Number: 76-0791385 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORMENEO, OSCAR
14140 S.W. 38 STREET
MIAMI, FL 33175 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

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: MORMENEO, OSCAR
Address: P.O. BOX 651280
City-St-Zip: MIAMI, FL 33265

Title: MM ( ) Delete
Name: MORMENEO, OSCAR V MM
Address: 4153 N.E. 26 STREET
City-St-Zip: HOMESTEAD, FL 33033

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MM (X) Change ( ) Addition
Name: MORMENEO, OSCAR V MM
Address: 14004 SW 93RD LANE
City-St-Zip: MIAMI, FL 33186

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 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: OSCAR MORMENEO MGR 04/14/2009

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