

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000076306

FILED
Mar 20, 2009
Secretary of State

Entity Name: ADVANCED CLAIM SOLUTION, LLC

Current Principal Place of Business:

14346 83RD LANE N.
LOXAHATCHEE, FL 33470 US

New Principal Place of Business:

Current Mailing Address:

10130 NORTHLAKE BLVD.
SUITE 214 - #251
WEST PALM BEACH, FL 33470 US

New Mailing Address:

FEI Number: 20-3664577 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROCHE, JOSEPH P
14346 83RD LANE N.
LOXAHATCHEE, FL 33470 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: ROCHE, JOSEPH
Address: 14346 83RD LANE N
City-St-Zip: LOXAHATCHEE, FL 33470 US

Title: MGR () Delete
Name: CRUZ, PAULINE
Address: 8A THISTLE WAY
City-St-Zip: BROAD BROOK, CT 06016 US

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: PAULINE, PAULINE
Address: 8A THISTLE WAY
City-St-Zip: BROAD BROOK, CT 06016 US

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: JOSEPH ROCHE

MGR

03/20/2009

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