

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000118749

Entity Name: WPS CAT CLAIMS LLC

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

3501 VILLAGE BLVD STE 305
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

3501 VILLAGE BLVD STE 305
WEST PALM BEACH, FL 33409

New Mailing Address:

31227 AVENUE A
BIG PINE KEY, FL 33043

FEI Number: 75-3206175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUCKABY, MELVYN
3501 VILLAGE BLVD STE 305
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

HUCKABY, MELVYN
31227 AVENUE A
BIG PINE KEY, FL 33043 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:

04/29/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HUCKABY, MELVYN
Address: 3501 VILLAGE BLVD STE 305
City-St-Zip: WEST PALM BEACH, FL 33409

Title: MGRM () Delete
Name: HUCKABY, ERIC
Address: 4 CHESTNUT STREET
City-St-Zip: CLINTON, NY 13323

Title: MGRM () Delete
Name: ANNETT, RIEGER
Address: S. ALLENDE #29
City-St-Zip: BERLIN, GE 14974 GE

ADDITIONS/CHANGES:

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

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

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

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: MELVYN HUCKABY

MEMB

04/29/2009

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