

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000038059

FILED
Sep 08, 2011
Secretary of State

Entity Name: MCDANIEL CLAIM SERVICE, LLC

Current Principal Place of Business:

2741 2ND AVENUE N.
ST. PETERSBURG, FL 33713

New Principal Place of Business:

12507 FOUR OAKS RD
TAMPA, FL 33624

Current Mailing Address:

PO BOX 4111
SAINT PETERSBURG, FL 33731

New Mailing Address:

PO BOX 291715
COLUMBIA, SC 29229

FEI Number: 86-1165698

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCDANIEL, ROBERT
2741 2ND AVENUE N.
ST. PETERSBURG, FL 33713 US

Name and Address of New Registered Agent:

MCDANIEL, ROBERT
12507 FOUR OAKS RD
TAMPA, FL 33624 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: ROBERT MCDANIEL

09/08/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: MCDANIEL, ROBERT
Address: PO BOX 291715
City-St-Zip: COLUMBIA, SC 29229

Title: MGRM
Name: MCDANIEL, SAMANTHA
Address: PO BOX 291715
City-St-Zip: COLUMBIA, SC 29229

I hereby 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 MCDANIEL

PRES

09/08/2011

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