

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000076248

FILED
Jul 28, 2007
Secretary of State

Entity Name: INNOVATIVE CLAIMS OF FLORIDA, LLC

Current Principal Place of Business:

7447 NIGHT HERON DRIVE
LAND O LAKES, FL 34637

New Principal Place of Business:

3152 LITTLE RD
SUITE 198
TRINITY, FL 34655

Current Mailing Address:

7447 NIGHT HERON DRIVE
LAND O LAKES, FL 34637

New Mailing Address:

3152 LITTLE RD
SUITE 198
TRINITY, FL 34655

FEI Number: 22-3940348 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: BARBARISE, JAMES C
Address: 7447 NIGHT HERON DRIVE
City-St-Zip: LAND O LAKES, FL 34637

Title: ST () Delete
Name: BARBARISE, NANCY
Address: 7447 NIGHT HERON DRIVE
City-St-Zip: LAND O LAKES, FL 34637

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BARBARISE, JAMES C
Address: 3152 LITTLE RD SUITE 198
City-St-Zip: TRINITY, FL 34655

Title: ST (X) Change () Addition
Name: BARBARISE, NANCY
Address: 3152 LITTLE RD SUITE 198
City-St-Zip: TRINITY, FL 34655

Title: MGR () Change (X) Addition
Name: GRAZIANO, STEVEN R
Address: 3152 LITTLE RD SUITE 198
City-St-Zip: TRINITY, FL 34655

Title: ST () Change (X) Addition
Name: GRAZIANO, MELISSA
Address: 3152 LITTLE RD SUITE 198
City-St-Zip: TRINITY, FL 34655

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: JAMES C BARBARISE

MGR

07/28/2007

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