

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000081217

FILED
Jul 30, 2009
Secretary of State

Entity Name: J.T.PUBLIC ADJUSTERS OF FLORIDA, LLC

Current Principal Place of Business:

2740 E OAKLAND PARK BLVD
103
FORT LAUDERDALE, FL 33308 US

Current Mailing Address:

2740 E OAKLAND PARK BLVD
103
FORT LAUDERDALE, FL 33308

New Principal Place of Business:

2740 E OAKLAND PARK BLVD
104
FORT LAUDERDALE, FL 33306 US

New Mailing Address:

2740 E OAKLAND PARK BLVD
104
FORT LAUDERDALE, FL 33306

FEI Number: 68-0654609 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:

WOODWARD, CRAIG R
606 BALD EAGLE DRIVE STE 500
MARCO ISLAND, FL 34145 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: TREDICI, JOSEPH
Address: 230 CARTERET STREET
City-St-Zip: STATEN ISLAND, NY 10307

Title: C () Delete
Name: WATTS, DANIELLE
Address: 3221 8 AVE SE
City-St-Zip: NAPLES, FL 34117

ADDITIONS/CHANGES:

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: JOSEPH TREDICI

MGR

07/30/2009

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