

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000111507

FILED
Feb 08, 2008
Secretary of State

Entity Name: HIGHPOINT CLAIMS SERVICES, LLC

Current Principal Place of Business:

9016 PHILIPS HWY.
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

9016 PHILIPS HWY.
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PINCKET, BRIAN
9016 PHILIPS HWY.
JACKSONVILLE, FL 32256 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: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: HIGHPOINT HOLDINGS,, INC.
Address: 9016 PHILIPS HWY
City-St-Zip: JACKSONVILLE, FL 32256

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: BRIAN PINCKET

VP

02/08/2008

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