

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000008973

FILED
Mar 23, 2009
Secretary of State

Entity Name: FLORIDA PENINSULA CLAIM SERVICES, LLC

Current Principal Place of Business:

621 N.W. 53RD STREET, SUITE 125
BOCA RATON, FL 33487

New Principal Place of Business:

621 N.W. 53RD STREET, SUITE 140
BOCA RATON, FL 33487

Current Mailing Address:

621 N.W. 53RD STREET, SUITE 125
BOCA RATON, FL 33487

New Mailing Address:

621 N.W. 53RD STREET, SUITE 140
BOCA RATON, FL 33487

FEI Number: 74-3249618

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIULIANTI, STACEY
621 N.W. 53RD STREET, SUITE 125
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

GIULIANTI, STACEY A ESQ
621 N.W. 53RD STREET, SUITE 125
BOCA RATON, FL 33487 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: STACEY A GIULIANTI

03/23/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

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

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: CANTOR, GARY M
Address: 621 NW 53 ST, SUITE 125
City-St-Zip: BOCA RATON, FL 33487

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: GARY M CANTOR

MGR

03/23/2009

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