

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000042539

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

**Entity Name:** WORLD CLASS LOSS MITIGATORS, L.L.C.

**Current Principal Place of Business:**

715 HIGHLAND AVE  
LEHIGH ACRES, FL 33972

**New Principal Place of Business:**

**Current Mailing Address:**

715 HIGHLAND AVE  
LEHIGH ACRES, FL 33972

**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:**

BUZZELL, A. JANE  
715 HIGHLAND AVE  
LEHIGH ACRES, FL 33972 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  
Name: BRAMBLE, LAURA  
Address: 915 LEROY AVENUE  
City-St-Zip: LEHIGH ACRES, FL 33972

Title: MGR  
Name: BUZZELL, A. JANE  
Address: 715 HIGHLAND AVENUE  
City-St-Zip: LEHIGH ACRES, FL 33972

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:** A. JANE BUZZELL

MGR

01/05/2010

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