2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 26, 2012
Secretary of State

DOCUMENT# L10000023299

Entity Name: INSURANCE CLAIM ADVISORS, LLC

Current Principal Place of Business:

2801 PGA BLVD. STE 110
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

2801 PGA BLVD. STE 110
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: 80-0579605 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KLEIN, STUART B
2801 PGA BLVD. STE 110
PALM BEACH GARDENS, FL 33410 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: MGRM
Name: KLEIN, STUART B
Address: 2801 PGA BLVD. STE 110
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: MGRM
Name: MERWIN, LARRY
Address: 103 DUNES EDGE ROAD
City-St-Zip: JUPITER, FL 33477

Title: MGRM
Name: GEMMI, PETER
Address: 328 SW OTTER RUN PLACE
City-St-Zip: STUART, FL 34997

Title: MGRM
Name: STEDMAN, KAREN E
Address: 3931 RCA BLVD. STE 3101
City-St-Zip: PALM BEACH GARDENS, FL 33410

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 Statues.

SIGNATURE: STUART KLEIN MGM 02/26/2012

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