

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000013219

Entity Name: CLAIMSPRO USA LLC

FILED
Apr 25, 2012
Secretary of State

Current Principal Place of Business:

713 VIRGINIA AVENUE
SAINT CLOUD, FL 34769 US

New Principal Place of Business:

3223 COUNTRY SIDE VIEW DR
SAINT CLOUD, FL 34772 US

Current Mailing Address:

713 VIRGINIA AVENUE
SAINT CLOUD, FL 34769 US

New Mailing Address:

3223 COUNTRY SIDE VIEW DR
SAINT CLOUD, FL 34772 US

FEI Number: 27-4605299

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

APA TAX & FINANCIAL SERVICES LLC
6900 S ORANGE BLOSSOM TRAIL
SUITE 302
ORLANDO, FL 32809 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: CHOUINARD, JEAN M
Address: 3223 COUNTRY SIDE VIEW DR
City-St-Zip: SAINT CLOUD, FL 34772 US

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: JEAN M CHOUINARD

MGRM

04/25/2012

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