

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000016764

FILED
Apr 30, 2012
Secretary of State

Entity Name: COASTAL CLAIM CONSULTANTS LLC

Current Principal Place of Business:

102 NE 2ND STREET
109
BOCA RATON, FL 33432 US

New Principal Place of Business:

Current Mailing Address:

102 NE 2ND STREET
109
BOCA RATON, FL 33432 US

New Mailing Address:

FEI Number: 27-4845630 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CONNOR, JOSHUA M
102 NE 2ND STREET
109
BOCA RATON, FL 33432 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: CONNOR, JOSHUA M
Address: 102 NE 2ND STREET, 109
City-St-Zip: BOCA RATON, FL 33432 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: JOSHUA M CONNOR MGRM 04/30/2012

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