2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 25, 2012
Secretary of State

DOCUMENT# L11000138148

Entity Name: ALLIANCE CLAIMS ADJUSTING LLC

Current Principal Place of Business:

416 OAK HAVEN DR.
ALTAMONTE SPRINGS, FL 32701 US

New Principal Place of Business:

Current Mailing Address:

416 OAK HAVEN DR.
ALTAMONTE SPRINGS, FL 32701 US

New Mailing Address:

FEI Number: 45-4013295 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCWILLIAMS, NICOLE
416 OAK HAVEN DR.
ALTAMONTE SPRINGS, FL 32701 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: MCWILLIAMS, NICOLE
Address: 416 OAK HAVEN DR.
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 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 Statues.

SIGNATURE: NICOLE MCWILLIAMS MGRM 02/25/2012

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