

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000004909

FILED
Apr 14, 2009
Secretary of State

Entity Name: REGAL CLAIM SERVICES, LLC

Current Principal Place of Business:

1201 BRICKELL AVE 8TH FL
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

2300 LAKEVIEW PKWY STE 275
ALPHARETTA, GA 30004

New Mailing Address:

2400 LAKEVIEW PKWY STE 475
ALPHARETTA, GA 30009

FEI Number: 76-0707679

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLEMING, JOHN J
1201 BRICKELL AVE 8TH FL
MIAMI, FL 33131 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 () Delete
Name: FLEMING, JOHN J III
Address: 2300 LAKEVIEW PKWY, STE 275
City-St-Zip: ALPHARETTA, GA 30004

Title: MGRM () Delete
Name: LYONS, LINDA
Address: 10 INDUSTRIAL BLVD., A COMPLEX, STE 12
City-St-Zip: LESTER, PA 19113

Title: MGRM () Delete
Name: FLEMING, LORRIE
Address: 2300 LAKEVIEW PARKWAY, STE 275
City-St-Zip: ALPHARETTA, GA 30004

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: FLEMING, JOHN J III
Address: 1201 BRICKELL AVE 8TH FL
City-St-Zip: MIAMI, FL 33131

Title: MGRM (X) Change () Addition
Name: LYONS, LINDA
Address: 10 INDUSTRIAL BLVD., E BLDG, STE 202
City-St-Zip: LESTER, PA 19113

Title: MGRM (X) Change () Addition
Name: FLEMING, LORRIE
Address: 2400 LAKEVIEW PARKWAY, STE 475
City-St-Zip: ALPHARETTA, GA 30009

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: JOHN J FLEMING III

MGR

04/14/2009

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