

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000004909

Entity Name: REGAL CLAIM SERVICES, LLC

FILED
Jan 13, 2011
Secretary of State

Current Principal Place of Business:

2400 LAKEVIEW PKWY STE 475
ALPHARETTA, GA 30009

New Principal Place of Business:

Current Mailing Address:

2400 LAKEVIEW PKWY STE 475
ALPHARETTA, GA 30009

New Mailing Address:

FEI Number: 76-0707679

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FLEMING, JOHN J
7785 66TH ST
PINELLAS PARK, FL 33781 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
Name: FLEMING, JOHN J III
Address: 7785 66TH ST
City-St-Zip: PINELLAS PARK, FL 33781

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

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

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: JOHN J. FLEMING

MGR

01/13/2011

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