File(on or before May 1, 1999 or Limited Liability Company will be ect to a \$ 400.00 LATE FEE SECRETARY OF STATE OPVISION OF CERPORATIONS LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE **Katherine Harris** ANNUAL REPORT Secretary of State 1999 **DIVISION OF CORPORATIONS** 99 MAR - 9 PM 3: 12 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT** # M97000000040 1a. Principal Place of Business Address HARBOR CLAIMS SERVICES, LLC 950 SOUTH WINTERPARK DRIVE, SUITE 100 950 SOUTH WINTERPARK DRIVE. CASSELBERRY FL 32707 CASSELBERRY FL 32707 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 01/30/1997 NY Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 91-1869534 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zip Zip Country Country \$8.75 Additional Fee Required 08/06/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 Suite Apt # etc Zip Code 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. Thereby accept the appointment as registered agent, and accept the obligations. SIGNATURE (Registered Agent Aucepting Appointment). (NOTE: Registered Agent signature required when reinstating). Managing Members/Managers **Business Street Address** City, State and Zip Code 10. Title MERA MGR CLARENDON NATIONAL I, 1177 6TH AVE.

HARBOR NATTOWAL CLASS 6210 Comptell Rd. Soite 200 Delles, TX. 75248 Raymond F. Walton, CPCU 6210 Campbell Rd. Frite 200 Dullas, TX. 75248 MGR edoca2201788----03/11/99--01003--023 ****188.75 ****188.7\$ RECEIVED FEB 1 8 1938 11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i). Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same logal 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, and that my name appears in Block 10, or on an

Regreend F. Wollen

attachment with an address

SIGNATURE: