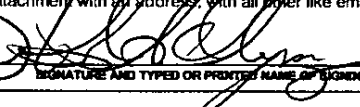


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2006 8:00 am
Secretary of State

01-19-2006 90080 001 ****61.25

DOCUMENT #N16988 1. Entity Name SOUTH FLORIDA CLAIMS ASSOCIATION, INC.					
Principal Place of Business C/O RONALD P PONZOLI 3250 MARY ST STE 302 MIAMI, FL 33133			Mailing Address C/O RONALD P PONZOLI 3250 MARY ST STE 302 MIAMI, FL 33133		
2. Principal Place of Business C/O JOHN R. BUCHHOLZ Suite, Apt. #, etc. 15600 NW 67 AVE #204 City & State MIAMI LAKES FL Zip 33014 Country USA		3. Mailing Address C/O JOHN R. BUCHHOLZ Suite, Apt. #, etc. 15600 NW 67 AVE #204 City & State MIAMI LAKES FL Zip 33014 Country USA			
4. FEI Number 59-2646500				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BUCHHOLZ, JOHN R KELLEY KRONENBERG GILMARTIN FICHTSL 2655 LEJEUNE RD CORAL GABLES, FL 33134			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) OK KELLEY KRON 15600 NW 67 AVE SUITE 204 City MIAMI LAKES FL Zip Code 33014		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BAYNE, THOMAS 14411 COMMERCE WY #400 MIAMI LAKES, FL 33016	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COLLER, DENISE 12466 W. ATLANTIC BLVD CORAL SPRINGS FL 33071	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FARLS, JOSEPH 7603 SW 105 AVE MIAMI, FL 33173	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GREGORY ROSS 10314 GENTLEWOOD FOREST DR BOYNTON BEACH FL 33437	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WHITE, JENNIFER 1486-A SKEES RD WEST PALM BEACH, FL 33411	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ETIENNE, FONT 14411 COMMERCE WAY, #440 MIAMI LAKES, FL 33016	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD DAVIS, BOB 8175 NW 153 ST #401 HIALEAH, FL 33014	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LAURIE FLOOD 105 TROPIC ISLE DR #26 DELRAY BEACH, FL 33483	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAN FARRELL 11704 MELALEUCA WAY COOPER CITY FL 33026	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D	☐ Change ☒ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  RICHARD G. OLYMPE 1-14-2006 954-432-1526					

ATTACHMENT
40003400

DOCUMENT (# N16988) CONTINUED

BLOCK # 11

D.

ADDITION

RICHARD G. OLYMPIO

1931 NW 86 AVE

PEMBROKE PINES FL 33024