

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000004651

FILED
Mar 29, 2006
Secretary of State

Entity Name: CLAIM SERVICES, INC., OF FLORIDA

Current Principal Place of Business:

2424 W. TAMPA BAY BLVD.
SUITE K-204
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

2424 W. TAMPA BAY BLVD.
SUITE K-204
TAMPA, FL 33607

New Mailing Address:

FEI Number: 30-0020801 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALLACE, ROY C
3228 A SUNSET KEY CIRCLE
PUNTA GORDA, FL 33955 US

Name and Address of New Registered Agent:

STANGE, ROBERT W
2424 W. TAMPA BAY BLVD.
K-204
TAMPA, FL 33607 US

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: ROBERT W. STANGE 03/29/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: WALLACE, ROY C
Address: 3228 A SUNSET KEY CIRCLE
City-St-Zip: PUNTA GORDA, FL 33955

Title: VT () Delete
Name: STANGE, ROBERT W SR.
Address: 2424 W. TAMPA BAY BLVD. SUITE K-204
City-St-Zip: TAMPA, FL 33607

Title: V () Delete
Name: DIXON, GLENN T
Address: 5905 IRON FRAME WAY
City-St-Zip: COLUMBIA, MD 21044

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: WALLACE, ROY C
Address: 770 PATTERSON MILL ROAD
City-St-Zip: GROTTUES, MD 24441

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT W. STANGE VT 03/29/2006

Electronic Signature of Signing Officer or Director Date