

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000138379

FILED
Apr 11, 2005
Secretary of State

Entity Name: WORKERS COMPENSATION RECOVERY SPECIALISTS, INC.

Current Principal Place of Business:

4903 SOUTH DIXIE HIGHWAY
WEST PALM BEACH, FL 33405 US

New Principal Place of Business:

Current Mailing Address:

4903 SOUTH DIXIE HIGHWAY
WEST PALM BEACH, FL 33405 US

New Mailing Address:

FEI Number: 20-0413815

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PORTER, MEGHAN
218 WENONAH DRIVE
#3
WEST PALM BEACH, FL FL US

Name and Address of New Registered Agent:

PORTER, MEGHAN
218 WENONAH PLACE
#3
WEST PALM BEACH, FL FL 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:

04/11/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PR () Delete
Name: PORTER, MEGHAN
Address: 218 WENONAH PLACE
City-St-Zip: WEST PALM BEACH, FL 33405 US

Title: COO () Delete
Name: MCCARTHY, KEVIN
Address: 6042 WINDING LAKE DRIVE
City-St-Zip: JUPITER, FL 33458 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PR (X) Change () Addition
Name: PORTER, MEGHAN M
Address: 218 WENONAH PLACE
City-St-Zip: WEST PALM BEACH, FL 33405 US

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 Section 119.07(3)(i), 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: MEGHAN M PORTER

PR

04/11/2005

Electronic Signature of Signing Officer or Director

Date