2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2011
Secretary of State

DOCUMENT# P03000138379

Entity Name: WORKERS COMPENSATION RECOVERY SPECIALISTS, INC.

Current Principal Place of Business:

11231 U.S. HIGHWAY ONE
#336
NORTH PALM BEACH, FL 33408 US

New Principal Place of Business:

Current Mailing Address:

11231 U.S. HIGHWAY ONE
#336
NORTH PALM BEACH, FL 33408 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
11231 U.S. HIGHWAY ONE
#336
NORTH PALM BEACH, FL FL 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

OFFICERS AND DIRECTORS:

Title: PVST
Name: PORTER, MEGHAN M
Address: 11231 US HIGHWAY ONE #336
City-St-Zip: NORTH PALM BEACH, FL 33408 US

I hereby 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 all other like empowered.

SIGNATURE: MEGHAN M PORTER PRES 04/18/2011

Electronic Signature of Signing Officer or Director Date