

P04000098897

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Roberts DEC 13 2006

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Property Claims Assistance, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P04000098897

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jack E. Owens
(Name of Contact Person)

J. E. Owens & Company, P.A.
(Firm/Company)

2731 Silver Star Road
(Address)

Orlando, Florida 32808
(City/State and Zip Code)

For further information concerning this matter, please call:

Jack E. Owens at (407) 293-2654
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Statement of Change of Registered Office or Registered Agent of Both
For Corporations

Property Claims Assistance, Inc.

Attachment of Form CR2E045

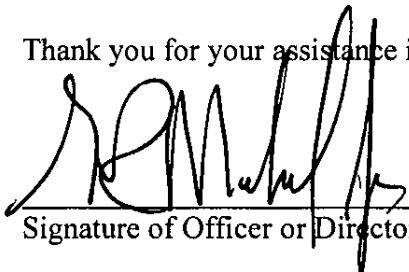
The attached form is being filed to change the Registered Agent and Registered Office of the above corporation. In addition, we would like to change the principal address to the following:

Property Claims Assistance, Inc.
2731 Silver Star Road
Orlando, Florida 32808

The mailing address will remain the same, as shown on the current state records:

Property Claims Assistance, Inc.
P O Box 300922
Fern Park, Florida 32730-0992

Thank you for your assistance in this matter.



Signature of Officer or Director

George R Markward, Jr.
President

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Property Claims Assistance, Inc.
2. The principal office address: 2731 Silver Star Road
Orlando, Florida 32808
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 06/30/2004 Document number: P04000098897

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

John M P Capponi

1251 Seminola Blvd. Suite 100

Casselberry, Florida 32707

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Jack E. Owens

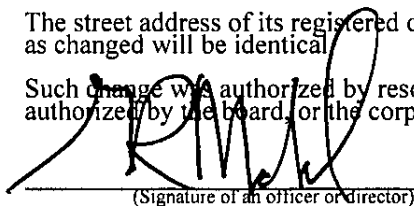
2731 Silver Star Road

(P.O. Box NOT acceptable)

Orlando, Florida 32808

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

George R Markward, Jr. President
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


(Signature of Registered Agent)

December 4, 2006

(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

FILED
06 DEC 11 AM 9:04
CLERK OF STATE
TALLAHASSEE, FLORIDA