

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000122261

FILED
Mar 09, 2005
Secretary of State

Entity Name: PREFERRED GOVERNMENTAL CLAIM SOLUTIONS, INC.

Current Principal Place of Business:

615 CRESENT EXECUTIVE COURT STE 600
LAKE MARY, FL 32746

New Principal Place of Business:

Current Mailing Address:

615 CRESENT EXECUTIVE COURT STE 600
LAKE MARY, FL 32746

New Mailing Address:

FEI Number: 20-1565528

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Change (X) Addition
Name: HENDERSON, JIM W
Address: 220 S. RIDGEWOOD AVE
City-St-Zip: DAYTONA BEACH, FL 32114

Title: VP () Change (X) Addition
Name: BOONE, SAM
Address: 5728 MAJOR BOULEVARD, STE. 450
City-St-Zip: ORLANDO, FL 32861

Title: VPS () Change (X) Addition
Name: GRAMMIG, LAUREL L
Address: 401 E. JACKSON ST., STE. 1700
City-St-Zip: TAMPA, FL 33602

Title: VPAS () Change (X) Addition
Name: DONEGAN, THOMAS M
Address: 401 E. JACKSON ST., STE. 1700
City-St-Zip: TAMPA, FL 33602

Title: VP () Change (X) Addition
Name: COTHROON, KEVIN
Address: 615 CRESCENT EXECUTIVE CT., STE. 600
City-St-Zip: LAKE MARY, FL 32746

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: LAUREL L. GRAMMIG

VPS

03/09/2005

Electronic Signature of Signing Officer or Director

Date