

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000142648

FILED
Dec 13, 2007
Secretary of State

Entity Name: AMERICAN SELECT CLAIM ADJUSTERS, INC.

Current Principal Place of Business:

631 CALIBRE CREST PKWY
103
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

919 W FIRST STREET
SANFORD, FL 32771

Current Mailing Address:

P.O. BOX 161026
ALTAMONTE SPRINGS, FL 32716

New Mailing Address:

FEI Number: 56-2537242

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PHILLIPS, TERRY
631 CALIBRE CREST PKWY
SUITE 103
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

PHILLIPS, TERRY
919 W FIRST STREET
SUITE 201
SANFORD, FL 32771 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: TERRY PHILLIPS

12/13/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PHILLIPS, TERRY
Address: 380 S. STATE RD. 434, SUITE 1104-176
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PHILLIPS, TERRY
Address: 919 W FIRST STREET SUITE 201
City-St-Zip: SANFORD, FL 32771 US

I hereby certify that the information supplied with this filing does not qualify 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: TERRY PHILLIPS

D

12/13/2007

Electronic Signature of Signing Officer or Director

Date